Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NEW YORK	-	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	 Check if this an mended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Thomas First name E. Middle name	First name Middle name
	Bring your picture identification to your meeting with the trustee.	Sobczak, Jr. Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2072	

Del	otor 1 Thomas E. Sobcza	ak, Jr.	Case number (if known)			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		97 Broadmoor Lane Westbury, NY 11590				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Nassau County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Deb	otor 1 Thomas E. Sobcza	ak, Jr.				Case number (if known)			
Par	t 2: Tell the Court About	Your Bank	ruptcy C	ase					
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Required by</i> page 1 and check the appropriat	11 U.S.C. § 342(b) for Individuals Filin te box.	ng for Bankruptcy		
	choosing to file under	■ Chap	ter 7						
		☐ Chap	ter 11						
		☐ Chapter 12							
		☐ Chap	ter 13						
8.	How you will pay the fee	abo ord a p	out how your der. If your pre-printed	ou may pay. Typic r attorney is subm d address.	cally, if you are paying the fee you itting your payment on your beh	ck with the clerk's office in your local co ourself, you may pay with cash, cashie lalf, your attorney may pay with a credi	er's check, or money it card or check with		
					allments. If you choose this option (Official Form 103A).	on, sign and attach the Application for	Individuals to Pay		
		□ Ire	equest that t is not rec plies to yo	at my fee be waiv quired to, waive your family size and	ved (You may request this option our fee, and may do so only if you are unable to pay the fee in	on only if you are filing for Chapter 7. By our income is less than 150% of the off on installments). If you choose this optic cial Form 103B) and file it with your pe	ficial poverty line that on, you must fill out		
			77		g	,,			
9.	Have you filed for bankruptcy within the	■ No.							
	last 8 years?	☐ Yes.							
			District		When	Case number			
			District						
			District		When	Case number			
10.	Are any bankruptcy cases pending or being	■ No							
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.							
			Debtor			Relationship to you			
			District		When	Case number, if known			
			Debtor			Relationship to you			
			District		When	Case number, if known			
11.	Do you rent your residence?	■ No.	Go to	line 12.					
	rodiuctive :	☐ Yes.	Has yo	our landlord obtair	ned an eviction judgment agains	st you?			
				No. Go to line 12	2.				
				Yes. Fill out <i>Initi</i> this bankruptcy		Judgment Against You (Form 101A) a	nd file it as part of		

Deb	tor 1 Thomas E. Sobcz	ak, Jr.			Case number (if known)				
Par	t 3: Report About Any Bu	sinesses	You Own	as a Sole Proprie	tor				
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.					
		☐ Yes.	Name	Name and location of business					
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any					
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Sta	te & ZIP Code				
	it to this petition.		Chec	k the appropriate bo	x to describe your business:				
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))				
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))				
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))				
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))				
				None of the above	e				
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> debtor?	deadline	s. If you ir is, cash-fl	ndicate that you are ow statement, and f	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure				
	For a definition of small	■ No.	I am r	not filing under Chap	oter 11.				
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code	•	11, but I am NOT a small business debtor according to the definition in the Bankruptcy				
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.				
Par	t 4: Report if You Own or	Have Any	· Hazardo	ous Property or An	y Property That Needs Immediate Attention				
14.	Do you own or have any	■ No.							
	property that poses or is alleged to pose a threat of imminent and	☐ Yes.	What is	the hazard?					
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			liate attention is why is it needed?					
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?					
					Number, Street, City, State & Zip Code				

Debtor 1 Case number (if known) Thomas E. Sobczak, Jr.

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1 Thomas E. Sobcz	ak, Jr.		Case number	BF (if known)			
Par	t 6: Answer These Quest	ions for R	eporting Purposes					
16.	What kind of debts do you have?	16a.		umer debts? Consumer debts are defi	ined in 11 U.S.C. § 101(8) as "incurred by an			
			□ No. Go to line 16b.					
			■ Yes. Go to line 17.					
		16b.		ness debts? Business debts are debts nent or through the operation of the bus				
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe	that are not consumer debts or busines	ss debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7.	Go to line 18.				
	Do you estimate that after any exempt property is excluded and	■ Yes.		ou estimate that after any exempt prop ble to distribute to unsecured creditors	perty is excluded and administrative expenses ?			
	administrative expenses are paid that funds will		■ No					
	be available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do	1 -49		1 ,000-5,000	2 5,001-50,000			
	you estimate that you owe?	□ 50-99		☐ 5001-10,000	☐ 50,001-100,000			
		□ 100-1 □ 200-9		☐ 10,001-25,000	☐ More than100,000			
19.	How much do you	□ \$0 - \$	550,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?		001 - \$100,000	□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion			
			,001 - \$500,000 ,001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion			
20.	How much do you	□ \$0 - \$	650,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?		001 - \$100,000 ,001 - \$500,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion			
			,001 - \$500,000 ,001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion			
Par	t 7: Sign Below							
For	you	I have ex	kamined this petition, and I declare	e under penalty of perjury that the inform	mation provided is true and correct.			
				am aware that I may proceed, if eligible, f available under each chapter, and I cl	, under Chapter 7, 11,12, or 13 of title 11, noose to proceed under Chapter 7.			
				pay or agree to pay someone who is no otice required by 11 U.S.C. § 342(b).	ot an attorney to help me fill out this			
		I request	t relief in accordance with the chap	oter of title 11, United States Code, spe	cified in this petition.			
I understand making a false statement, concealir bankruptcy case can result in fines up to \$250,00 and 3571.			tcy case can result in fines up to \$ 1.					
			mas E. Sobczak, Jr. s E. Sobczak, Jr.	Signature of Debto	or 2			
			e of Debtor 1	Signature of Debito	n <u>L</u>			
		Execute		Executed on				
			MM / DD / YYYY	MM	I / DD / YYYY			

Debtor 1 Thomas E. Sobcz	ak, Jr.	Cas	Case number (if known)		
		and the state of t			
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, Unit	ed States Code, and have e	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)		
If you are not represented by an attorney, you do not need to file this page.			rledge after an inquiry that the information in the		
	/s/ Hanin R. Shadood	Date	July 29, 2019		
	Signature of Attorney for Debtor		MM / DD / YYYY		
	Hanin R. Shadood 5489596 Printed name				
	Aronow Law, PC				
	Firm name				
	20 Crossways Park Drive North				
	Suite 210				
	Woodbury, NY 11797				
	Number, Street, City, State & ZIP Code				
	Contact phone 516-762-6700	Email address	Hanin.S@AronowLaw.com		
	5489596 NY				
	Bar number & State				

Fill	in this information to identify your case:		
Deb	tor 1 Thomas E. Sobczak, Jr.		
Dok	First Name Middle Name Last Name tor 2		
1 .	use if, filing) First Name Middle Name Last Name		
Uni	ed States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK		
Cas (if kn	e number	_	if this is an led filing
		amone	.cag
Of	icial Form 106Sum		
	mmary of Your Assets and Liabilities and Certain Statistical Information	1	2/15
info	s complete and accurate as possible. If two married people are filing together, both are equally responsible for mation. Fill out all of your schedules first; then complete the information on this form. If you are filing amend original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Par	1: Summarize Your Assets		
		Your as Value o	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	374,691.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	15,035.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	389,726.00
Par	2: Summarize Your Liabilities		
			abilities you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	355,123.88
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	190,914.95
	Your total liabilities	\$	546,038.83
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,870.12
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	6,329.85
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	edules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal,	family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this the court with your other schedules.	<i>box</i> and su	ubmit this form to

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Debtor 1 Thomas E. Sobczak, Jr.

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

9,491.11

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on <i>Schedule E/F</i> , copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	149,820.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	149,820.00

Debt	or 1	Thomas E. S	obczak Ir				
Debt	OI I	First Name		e Name	Last Name		
Debt (Spous	or 2 se, if filing)	First Name	Middle	e Name	Last Name		
Unite	d States Bank	ruptcy Court for	the: EASTERN	DISTRIC	CT OF NEW YORK		
		,					_
Case	number						Check if this is an amended filing
_		<u>m 106A/B</u>	•				
<u>Sc</u>	<u>hedule</u>	A/B: Pr	operty				12/15
	er every questic	on.	•		is form. On the top of any additional pages	o, mile your name and co	ace number (ii known).
1. Do	you own or hav	ve any legal or equ	uitable interest in a	any reside	ence, building, land, or similar property?		
	No. Go to Part 2						
	Yes. Where is the	he property?					
	Yes. Where is the	he property?					
	Yes. Where is the	he property?		Whati	is the property? Cheek all that each		
1.1	Yes. Where is the				is the property? Check all that apply Single-family home	Do not deduct secured	claims or exemptions. Put
1.1	97 Broadmo		ription		is the property? Check all that apply Single-family home Duplex or multi-unit building	the amount of any secu	claims or exemptions. Put red claims on <i>Schedule D:</i> aims Secured by Property.
1.1	97 Broadmo	oor Lane	ription		Single-family home	the amount of any secu	
1.1	97 Broadmo	oor Lane	ription		Single-family home Duplex or multi-unit building	the amount of any secu Creditors Who Have Cl	red claims on Śchedule D: aims Secured by Property.
1.1	97 Broadmo Street address, if a	oor Lane available, or other desc NY	11590-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	the amount of any secu Creditors Who Have Cl Current value of the entire property?	red claims on Schedule D: aims Secured by Property. Current value of the portion you own?
1.1	97 Broadmo Street address, if a	oor Lane available, or other desc			Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	the amount of any secu Creditors Who Have Cl Current value of the entire property? \$374,691.00	red claims on Schedule D: aims Secured by Property. Current value of the portion you own? \$374,691.00
1.1	97 Broadmo Street address, if a	oor Lane available, or other desc NY	11590-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	Current value of the entire property? \$374,691.00 Describe the nature of (such as fee simple, to	current value of the portion you own? \$374,691.00 Source of the portion you own?
1.1	97 Broadmo Street address, if a	oor Lane available, or other desc NY	11590-0000	■ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one	Current value of the entire property? \$374,691.00 Describe the nature of (such as fee simple, to a life estate), if known	current value of the portion you own? \$374,691.00 Source of the portion you own?
-	97 Broadmo Street address, if a	oor Lane available, or other desc NY	11590-0000	Who h	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	Current value of the entire property? \$374,691.00 Describe the nature of (such as fee simple, to	current value of the portion you own? \$374,691.00 Source of the portion you own?
-	97 Broadmo Street address, if a Westbury City	oor Lane available, or other desc NY	11590-0000	Who h	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	current value of the entire property? \$374,691.00 Describe the nature of (such as fee simple, to a life estate), if known Fee simple	current value of the portion you own? \$374,691.00 f your ownership interest enancy by the entireties, or
-	97 Broadmo Street address, if a Westbury City	oor Lane available, or other desc NY	11590-0000	Who h	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	the amount of any secucine Creditors Who Have Classifications Who Have	current value of the portion you own? \$374,691.00 Source of the portion you own?
-	97 Broadmo Street address, if a Westbury City	oor Lane available, or other desc NY	11590-0000	Who h	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	the amount of any secucine Creditors Who Have Classifications Who Have	current value of the portion you own? \$374,691.00 f your ownership interest enancy by the entireties, or
-	97 Broadmo Street address, if a Westbury City	oor Lane available, or other desc NY	11590-0000	Who h	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other nas an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another information you wish to add about this itee	the amount of any secucine Creditors Who Have Classifications Who Have	current value of the portion you own? \$374,691.00 f your ownership interest enancy by the entireties, or
-	97 Broadmo Street address, if a Westbury City	oor Lane available, or other desc NY	11590-0000	Who h	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	the amount of any secucine Creditors Who Have Classifications Who Have	current value of the portion you own? \$374,691.00 f your ownership interest enancy by the entireties, or

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Debt	or 1 <u>T</u>	homas E. Sobczak, Jr.		Case number (if kno	wn)	
3 Ca	rs. vans.	trucks, tractors, sport utilit	v vehicles, motorcycles			
	,	,,, . 	,			
	No					
	Yes					
3.1	Make:	Chrystler	Who has an interest in the property? Check one	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D</i> :		
	Model:	Town and Country	Debtor 1 only			ns Secured by Property.
	Year:	2011	Debtor 2 only	Current value	e of the	Current value of the
	Approxin	nate mileage: 13900	Debtor 1 and Debtor 2 only	entire proper	ty?	portion you own?
		ormation:	At least one of the debtors and another			
	Value	oy www.nada.com		\$ 3	250.00	\$3,250.00
			Check if this is community property (see instructions)			Ψ3,230.00
3.2	Make:	Kia	Who has an interest in the property? Check one	Do not deduc	secured cla	aims or exemptions. Put
5.2		Forte	— <u> </u>			d claims on Schedule D: ns Secured by Property.
	Model: Year:	2010	Debtor 1 only Debtor 2 only			
		nate mileage: 11000		Current value entire proper		Current value of the portion you own?
		ormation:	☐ At least one of the debtors and another		· ·	,
	Value	by www.nada.com				
			☐ Check if this is community property	\$5 ,	595.00	\$5,595.00
			(see instructions)			
			u own for all of your entries from Part 2, including			\$8.845.00
.pa	iges you	nave attached for Part 2. w	rite that number here	=>	' <u> </u>	40,0000
Part 3	Doscri	be Your Personal and Househo	ald Itams			
			le interest in any of the following items?		(Current value of the
<i>-</i> 0,	ou o c	, nave any logar or oquitab	is into each many or the real entire in the income		ŗ	oortion you own? Oo not deduct secured laims or exemptions.
E:		goods and furnishings Major appliances, furniture, lin scribe	nens, china, kitchenware			
		desks, 1 kite	nkbed, 4 dressers, 1 entertainment cabinet, 1 chen table with chairs and assorted kitchen 7 Broadmoore Lane, Westbury NY 11590			\$2,400.00
			, ,		-	
E	•		, video, stereo, and digital equipment; computers, prii as, media players, games	nters, scanners; mus	sic collection	ons; electronic devices
_	No Yes. De	scribe				
		-				
			, 1 laptop, 1 printer, 1 VCR, and DVD Stereo. 7 Broadmoore Lane, Westbury NY 11590			\$1,400.00
		Location. 9	Distantionic Latte, Hestbury NT 11390			+ -,

De	ebtor 1 Thomas	S E. Sobczak, Jr. Case number	(if known)
	other co	ue s and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; st ollections, memorabilia, collectibles	amp, coin, or baseball card collections;
	■ No □ Yes. Describe		
9.		orts and hobbies photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skie instruments	s; canoes and kayaks; carpentry tools;
	■ No □ Yes. Describe		
	Firearms		
	Examples: Pistols ■ No	, rifles, shotguns, ammunition, and related equipment	
	Yes. Describe		
	□ No	lay clothes, furs, leather coats, designer wear, shoes, accessories	
	Yes. Describe		1
		Miscellaneous clothing Location: 97 Broadmoore Lane, Westbury NY 11590	\$1,500.00
	□ No ■ Yes. Describe	wedding band and 2 watches Location: 97 Broadmoore Lane, Westbury NY 11590	\$750.00
	Non-farm animals Examples: Dogs, □ No ■ Yes. Describe	cats, birds, horses	7
		2 dogs and 2 cats Location: 97 Broadmoore Lane, Westbury NY 11590	\$0.00
	Any other person ■ No □ Yes. Give speci	al and household items you did not already list, including any health aids you did	not list
15		alue of all of your entries from Part 3, including any entries for pages you have atta that number here	\$6,050.00
		Financial Assets	
Do	you own or have	any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	No	you have in your wallet, in your home, in a safe deposit box, and on hand when you file	your petition
	□ 1€5		

De	ebtor 1	Thomas E. Sobczak, Jr.	Case number (if known)	
17.	Depos	its of money		
		oles: Checking, savings, or other financial acco institutions. If you have multiple accounts	punts; certificates of deposit; shares in credit unions, brokerage houses, as with the same institution, list each.	and other similar
	□ No ■ Yes		Institution name:	
		47.4 Observing	TD Bank	¢4.40.00
		17.1. Checking	Account ending in 3037	\$140.00
18.	Examp	, mutual funds, or publicly traded stocks ples: Bond funds, investment accounts with bro	okerage firms, money market accounts	
	■ No □ Yes	Institution or issuer	name:	
19.	Non-pu		orated and unincorporated businesses, including an interest in an L	.LC, partnership, and
	■ No			
	☐ Yes.	Give specific information about them	% of ownership:	
20.	Negoti		otiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. ansfer to someone by signing or delivering them.	
		Give specific information about them Issuer name:		
21.		ment or pension accounts oles: Interests in IRA, ERISA, Keogh, 401(k), 4	403(b), thrift savings accounts, or other pension or profit-sharing plans	
	☐ Yes.	List each account separately. Type of account:	Institution name:	
22.	Your s Examp		o that you may continue service or use from a company public utilities (electric, gas, water), telecommunications companies, or o	others
	■ No □ Yes.		Institution name or individual:	
23			ey to you, either for life or for a number of years)	
20.	■ No □ Yes		by to you, cliner for the or for a number of years)	
24			ualified ABLE program, or under a qualified state tuition program.	
24 .		C. §§ 530(b)(1), 529A(b), and 529(b)(1).	damed ADEC program, or under a quamed state tutton program.	
	☐ Yes	Institution name and description	n. Separately file the records of any interests.11 U.S.C. § 521(c):	
25.	Trusts,	, equitable or future interests in property (o	other than anything listed in line 1), and rights or powers exercisable	for your benefit
	☐ Yes.	Give specific information about them		
26.	_Examp	s, copyrights, trademarks, trade secrets, ar bles: Internet domain names, websites, procee		
	■ No □ Yes.	Give specific information about them		
	Licens	es, franchises, and other general intangible	es perative association holdings, liquor licenses, professional licenses	
	■ No	Give specific information about them	ocialivo associaliori riolalitys, liquol licerises, professiorial licerises	
		property owed to you?	C	irrent value of the
		pp,	Ou Ou	

De	ebtor 1	Thomas E. Sobczak, Jr.	Case number (if known)	
				Do not deduct secured claims or exemptions.
28.	_	unds owed to you		
	■ No	Give specific information about them, including whether you already filed the	returns and the tax veers	
	□ 1es. (one specific information about them, including whether you already filed the	e returns and the tax years	
29.	Family Examp	support les: Past due or lump sum alimony, spousal support, child support, mainten	ance, divorce settlement, property	settlement
	■ No			
	⊔ Yes. (Give specific information		
30.	Examp _	mounts someone owes you les: Unpaid wages, disability insurance payments, disability benefits, sick payments; unpaid loans you made to someone else	ay, vacation pay, workers' compen	sation, Social Security
	■ No	Cive anguitie information		
		Give specific information		
31.		ts in insurance policies <i>les:</i> Health, disability, or life insurance; health savings account (HSA); credi	t homeowner's or renter's insuran	ce
	■ No	ison rounting arounting, or me meanance, nearing account (i.e. y, orea.	,	
	☐ Yes. I	Name the insurance company of each policy and list its value.	Daniel Calama	Ourse des en efect
		Company name:	Beneficiary:	Surrender or refund value:
	If you a someon	erest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance poline has died. Give specific information	icy, or are currently entitled to rece	ive property because
33.		against third parties, whether or not you have filed a lawsuit or made a les: Accidents, employment disputes, insurance claims, or rights to sue	a demand for payment	
	☐ Yes.	Describe each claim		
34.	Other c	ontingent and unliquidated claims of every nature, including counterc	laims of the debtor and rights to	set off claims
	☐ Yes.	Describe each claim		
	■ No	ancial assets you did not already list		
	☐ Yes.	Give specific information		
36		ne dollar value of all of your entries from Part 4, including any entries f rt 4. Write that number here		\$140.00
Pa	rt 5: Des	scribe Any Business-Related Property You Own or Have an Interest In. List any r	eal estate in Part 1.	
37.	Do vou o	wn or have any legal or equitable interest in any business-related property?		
	No. Go			
[☐ Yes. G	o to line 38.		
Pa		scribe Any Farm- and Commercial Fishing-Related Property You Own or Have an ou own or have an interest in farmland, list it in Part 1.	Interest In.	
46.	Do you	own or have any legal or equitable interest in any farm- or commercia	I fishing-related property?	
	■ No.	Go to Part 7.		
	☐ Yes.	Go to line 47.		

Debtor 1	Thomas E. Sobczak, Jr.		Case number (if known)	
Part 7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
	ou have other property of any kind you did not already list? nples: Season tickets, country club membership			
■ No				
☐ Yes	s. Give specific information			
54. Add	the dollar value of all of your entries from Part 7. Write tha	t number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. Part	1: Total real estate, line 2			\$374,691.00
56. Part	2: Total vehicles, line 5	\$8,845.00		
57. Part	3: Total personal and household items, line 15	\$6,050.00		
58. Part	4: Total financial assets, line 36	\$140.00		
59. Part	5: Total business-related property, line 45	\$0.00		
60. Part	6: Total farm- and fishing-related property, line 52	\$0.00		
61. Part	7: Total other property not listed, line 54 +	\$0.00		
62. Tota	al personal property. Add lines 56 through 61	\$15,035.00	Copy personal property total	\$15,035.00
63. Tota	al of all property on Schedule A/B. Add line 55 + line 62			\$389.726.00

Fill	I in this information to identify your case:				
De	btor 1 Thomas E. Sobczak, Ji	•.			
_	First Name	Middle Name	L	ast Name	
	btor 2 ouse if, filing) First Name	Middle Name	L	_ast Name	
Lln	ited States Penkruptov Court for the	TERN DISTRICT OF N	=\^/ \/	OPK	
Un	ited States Bankruptcy Court for the: EAS	TERN DISTRICT OF IN	⊏ VV I	OKK	
	se number				
(if kı	nown)				Check if this is an
					amended filing
Of	fficial Form 106C				
		rty Vou Cla	im	ac Evemnt	440
<u> </u>	chedule C: The Prope	erty fou Cia	11111	i as exempt	4/19
the nee case	as complete and accurate as possible. If two property you listed on Schedule A/B: Propert ded, fill out and attach to this page as many one number (if known). each item of property you claim as exempt as compared to the property you claim as compared to the prope	y (Official Form 106A/B) copies of <i>Part 2: Addition</i> ot, you must specify the	as yo nal Pa e amo	our source, list the property that you age as necessary. On the top of any ount of the exemption you claim.	claim as exempt. If more space is additional pages, write your name and One way of doing so is to state a
any func exe	cific dollar amount as exempt. Alternative applicable statutory limit. Some exemption ds—may be unlimited in dollar amount. Ho applicable statutory amount.	ons—such as those for owever, if you claim an	heal exen	th aids, rights to receive certain b nption of 100% of fair market valu	penefits, and tax-exempt retirement to under a law that limits the
Pa	rt 1: Identify the Property You Claim as	Exempt			
1.	Which set of exemptions are you claimin	g? Check one only, eve	n if yo	our spouse is filing with you.	
	☐ You are claiming state and federal nonba	inkruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	You are claiming federal exemptions. 11				
	You are claiming rederal exemptions.	0.5.0. 9 522(0)(2)			
2.	For any property you list on Schedule A/	B that you claim as exe	empt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
	Conceano 702 mar note tine property	Copy the value from	Che	eck only one box for each exemption.	
		Schedule A/B		•	
	97 Broadmoor Lane Westbury, NY	\$374,691.00		\$19,833.96	11 U.S.C. § 522(d)(1)
	11590 Nassau County Value by www.zillow.com			100% of fair market value, up to	
	Line from Schedule A/B: 1.1		_	any applicable statutory limit	
	2011 Chrystler Town and Country 139000 miles	\$3,250.00		\$3,250.00	11 U.S.C. § 522(d)(2)
	Value by www.nada.com			100% of fair market value, up to	
	Line from Schedule A/B: 3.1			any applicable statutory limit	
					44 11 0 0 0 0 0004 11/51
	2010 Kia Forte 110000 miles Value by www.nada.com	\$5,595.00		\$5,328.16	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B: 3.2			100% of fair market value, up to	
				any applicable statutory limit	
	Miscellaneous clothing	4		A. =	11 U.S.C. § 522(d)(3)
	Location: 97 Broadmoore Lane,	\$1,500.00		\$1,500.00	11 0.0.0. § 022(a)(0)
	Westbury NY 11590 Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	
	LINE HOTH Scriedule AVD. 11.1			any applicable statutory little	
	Wedding band and 2 watches	\$750.00		\$750.00	11 U.S.C. § 522(d)(4)
	Location: 97 Broadmoore Lane, Westbury NY 11590		_	· · · · · · · · · · · · · · · · · · ·	
	Line from Schedule A/B: 12.1		_	100% of fair market value, up to any applicable statutory limit	

Official Form 106C

	Thomas E. Sobczak, Jr.		Case number (if known)			
	f description of the property and line on edule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption		
		Copy the value from Schedule A/B	Check only one box for each exemption.			
	ecking: TD Bank count ending in 3037	\$140.00	140.00	11 U.S.C. § 522(d)(5)		
	e from Schedule A/B: 17.1		100% of fair market value, up to any applicable statutory limit			
			any applicable statutory limit			
. Are	you claiming a homestead exemption	of more than \$170,35	0?			
	bject to adjustment on 4/01/22 and every		0? Ises filed on or after the date of adjustmen	nt.)		
	, ,			nt.)		
	oject to adjustment on 4/01/22 and every No	3 years after that for ca		,		
	oject to adjustment on 4/01/22 and every No	3 years after that for ca	ses filed on or after the date of adjustmen	,		

Official Form 106C

	in this information to identify yo	ur case:			
Deb	otor 1 Thomas E. Sol	OCZAK, Jr. Middle Name Last Name			
Dok	otor 2	Middle Name Last Name			
	use if, filing) First Name	Middle Name Last Name			
Uni	ted States Bankruptcy Court for the	EASTERN DISTRICT OF NEW YORK			
	se number				
(if kn	own)			_	if this is an
				amend	led filing
∩ff	icial Form 106D				
		- M/I 11 Ol-! C	D		
<u>SC</u>	neaule D: Creditor	s Who Have Claims Secured	by Propert	<u>y </u>	12/15
is ne	eded, copy the Additional Page, fill i	. If two married people are filing together, both are eq t out, number the entries, and attach it to this form. On			
	ber (if known).	. •			
	any creditors have claims secured				
	☐ No. Check this box and submit	this form to the court with your other schedules. Yo	ou have nothing else t	o report on this form.	
	Yes. Fill in all of the information	below.			
Par	t 1: List All Secured Claims				
2. L	ist all secured claims. If a creditor has	more than one secured claim, list the creditor separately	Column A	Column B	Column C
for e	each claim. If more than one creditor ha	more than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2. As tical order according to the creditor's name.	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
for e	each claim. If more than one creditor hat has possible, list the claims in alphabe	as a particular claim, list the other creditors in Part 2. As tical order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
for e	each claim. If more than one creditor ha	as a particular claim, list the other creditors in Part 2. As tical order according to the creditor's name. Describe the property that secures the claim: 97 Broadmoor Lane Westbury, NY	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
for e	each claim. If more than one creditor hath as possible, list the claims in alphabe SLS Creditor's Name	be a particular claim, list the other creditors in Part 2. As tical order according to the creditor's name. Describe the property that secures the claim: 97 Broadmoor Lane Westbury, NY 11590 Nassau County	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
for e	each claim. If more than one creditor hat as possible, list the claims in alphabe SLS Creditor's Name 8742 Lucent Blvd	Describe the property that secures the claim: 97 Broadmoor Lane Westbury, NY 11590 Nassau County Value by www.zillow.com As of the date you file, the claim is: Check all that	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
for e	such claim. If more than one creditor hat as possible, list the claims in alphabe SLS Creditor's Name 8742 Lucent Blvd suite 300	Describe the property that secures the claim: 97 Broadmoor Lane Westbury, NY 11590 Nassau County Value by www.zillow.com As of the date you file, the claim is: Check all that apply.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
for e	such claim. If more than one creditor hat has possible, list the claims in alphabe SLS Creditor's Name 8742 Lucent Blvd suite 300 Littleton, CO 80129	Describe the property that secures the claim: 97 Broadmoor Lane Westbury, NY 11590 Nassau County Value by www.zillow.com As of the date you file, the claim is: Check all that apply. Contingent	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
for e	such claim. If more than one creditor hat as possible, list the claims in alphabe SLS Creditor's Name 8742 Lucent Blvd suite 300	Describe the property that secures the claim: 97 Broadmoor Lane Westbury, NY 11590 Nassau County Value by www.zillow.com As of the date you file, the claim is: Check all that apply. Unliquidated	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1	such claim. If more than one creditor hat has possible, list the claims in alphabe SLS Creditor's Name 8742 Lucent Blvd suite 300 Littleton, CO 80129	Describe the property that secures the claim: 97 Broadmoor Lane Westbury, NY 11590 Nassau County Value by www.zillow.com As of the date you file, the claim is: Check all that apply. Contingent	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1	such claim. If more than one creditor hat has possible, list the claims in alphabeth as possible, list the claims in alphabeth substitution. 8742 Lucent Blvd suite 300 Littleton, CO 80129 Number, Street, City, State & Zip Code	Describe the property that secures the claim: 97 Broadmoor Lane Westbury, NY 11590 Nassau County Value by www.zillow.com As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed	Amount of claim Do not deduct the value of collateral. \$321,117.04	Value of collateral that supports this claim	Unsecured portion If any
for € muad	such claim. If more than one creditor hat as possible, list the claims in alphabeth as possible as possible, list the claims in alphabeth as possible as pos	Describe the property that secures the claim: 97 Broadmoor Lane Westbury, NY 11590 Nassau County Value by www.zillow.com As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply.	Amount of claim Do not deduct the value of collateral. \$321,117.04	Value of collateral that supports this claim	Unsecured portion If any
2.1 Whe □ [such claim. If more than one creditor hat as possible, list the claims in alphabeth as possible as possible, list the claims in alphabeth as possible	as a particular claim, list the other creditors in Part 2. As tical order according to the creditor's name. Describe the property that secures the claim: 97 Broadmoor Lane Westbury, NY 11590 Nassau County Value by www.zillow.com As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or sec	Amount of claim Do not deduct the value of collateral. \$321,117.04	Value of collateral that supports this claim	Unsecured portion If any
2.1 Whh □ [□ [□ 1]	such claim. If more than one creditor hat as possible, list the claims in alphabeth as possible as pos	as a particular claim, list the other creditors in Part 2. As tical order according to the creditor's name. Describe the property that secures the claim: 97 Broadmoor Lane Westbury, NY 11590 Nassau County Value by www.zillow.com As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or sec car loan)	Amount of claim Do not deduct the value of collateral. \$321,117.04	Value of collateral that supports this claim	Unsecured portion If any
Who □ [□ [□ [□ [□ [□ [□ [□ [□ [□	sach claim. If more than one creditor hat as possible, list the claims in alphabe SLS Creditor's Name 8742 Lucent Blvd suite 300 Littleton, CO 80129 Number, Street, City, State & Zip Code to owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	as a particular claim, list the other creditors in Part 2. As tical order according to the creditor's name. Describe the property that secures the claim: 97 Broadmoor Lane Westbury, NY 11590 Nassau County Value by www.zillow.com As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or sec car loan) Statutory lien (such as tax lien, mechanic's lien)	Amount of claim Do not deduct the value of collateral. \$321,117.04	Value of collateral that supports this claim	Unsecured portion If any

Official Form 106D

Debtor 1 Thomas E. Sobczak, J	r.	Case number (if known)		
First Name Middle	Name Last Name			
2.2 TD Bank USA, NA	Describe the property that secures the claim:	\$33,740.00	\$374,691.00	\$0.00
Creditor's Name	97 Broadmoor Lane Westbury, NY 11590 Nassau County Value by www.zillow.com	Ψ55,740.00	ψ074,031.00	ΨΟ.ΟΟ
3701 Wyzata Blvd Minneapolis, MN 55416	As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortgage or scar loan)	secured		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	3			
☐ Check if this claim relates to a community debt	Other (including a right to offset)	luity Loan		
Opened 08/06 Last Active	070			
Date debt was incurred 11/01/18	Last 4 digits of account number 970	<u> </u>		
2.3 Teachers Federal Credit	Describe the property that secures the claim:	\$266.84	\$5,595.00	\$0.00
Creditor's Name	2010 Kia Forte 110000 miles Value by www.nada.com			
2410 N Ocean Avenue Farmingville, NY 11738	As of the date you file, the claim is: Check all that apply. ☐ Contingent	I		
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortgage or scar loan)	secured		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)	ive		
Date debt was incurred	Last 4 digits of account number 8883	3		
-	Column A on this page. Write that number here: In the dollar value totals from all pages.	\$355,123		
Write that number here:	d the donar value totals from all pages.	\$355,123	3.88	
Part 2: List Others to Be Notified	for a Debt That You Already Listed			
Use this page only if you have others to trying to collect from you for a debt you	be notified about your bankruptcy for a debt that your be notified about your bankruptcy for a debt that you owe to someone else, list the creditor in Part 1, and at you listed in Part 1, list the additional creditors h	d then list the collection age	ency here. Similarly, if you l	nave more
Name, Number, Street, City, State &	& Zip Code On w	which line in Part 1 did you ent	er the creditor? _2.1_	
Stern & Eisenberg, PC 485 B Route 1 South suite 330	Last	4 digits of account number	-	
Iselin. NJ 08830				

Official Form 106D

Fill in this inform	ation to identify your cas	se:				
Debtor 1	Thomas E. Sobczak	•				
D 14 0	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
	kruptcy Court for the: E	EASTERN DISTRICT	OF NEW YORK			
Casa numbar	_					
Case number(if known)					_	c if this is an
Official Form	106E/F /F: Creditors Who	o Have Unsec	eured Claims		•	12/15
Schedule G: Execute Schedule D: Credito	ory Contracts and Unexpired ors Who Have Claims Secured inuation Page to this page. It	d Leases (Official Form d by Property. If more s	 Also list executory contract 106G). Do not include any crespace is needed, copy the Partion to report in a Part, do not 	editors with partially s t you need, fill it out,	secured claims that number the entries	are listed in in the boxes on the
	,					
	of Your PRIORITY Unsec					
1. Do any creditor	of Your PRIORITY Unsecured cl					
1. Do any creditor No. Go to Pa	of Your PRIORITY Unsecured cl					
1. Do any creditor ☐ No. Go to Pa ☐ Yes.	of Your PRIORITY Unsectors have priority unsecured clart 2.	laims against you?				
 Do any creditor No. Go to Pa Yes. List all of your identify what type possible, list the 	I of Your PRIORITY Unsecured clart 2. priority unsecured claims. If e of claim it is. If a claim has be	a creditor has more than oth priority and nonprioric cording to the creditor's	n one priority unsecured claim, li ty amounts, list that claim here a name. If you have more than tw preditors in Part 3.	and show both priority a	and nonpriority amou	nts. As much as
 Do any creditor No. Go to Pa Yes. List all of your identify what type possible, list the Part 1. If more the 	I of Your PRIORITY Unsectors have priority unsecured claim 2. priority unsecured claims. If e of claim it is. If a claim has be claims in alphabetical order ac	a creditor has more than oth priority and nonprioric coording to the creditor's ular claim, list the other continuous and the continuous and the continuous and the continuous and the continuous according to the continuous acco	ty amounts, list that claim here a name. If you have more than two creditors in Part 3.	and show both priority a o priority unsecured cl	and nonpriority amou aims, fill out the Cont	nts. As much as inuation Page of
 Do any creditor No. Go to Pa Yes. List all of your identify what type possible, list the Part 1. If more the 	I of Your PRIORITY Unsecured clart 2. priority unsecured claims. If e of claim it is. If a claim has be claims in alphabetical order achan one creditor holds a particular to the claim of the claim in alphabetical order achan one creditor holds a particular to the claims in alphabetical order achan one creditor holds a particular to the claims in alphabetical order achan one creditor holds a particular to the claims in alphabetical order achan one creditor holds a particular to the claims in alphabetical order achan one creditor holds a particular to the claims in alphabetical order achan one creditor holds a particular to the claims in alphabetical order achan one creditor holds a particular to the claims in alphabetical order achan one creditor holds a particular to the claims in alphabetical order achan one creditor holds a particular to the claims in alphabetical order achan one creditor holds a particular to the claims in alphabetical order achan one creditor holds a particular to the claims in alphabetical order achan one creditor holds a particular to the claims in alphabetical order achan one creditor holds a particular to the claims in alphabetical order achan one creditor holds a particular to the claims in alphabetical order achan one creditor holds a particular to the claims in alphabetical order achan one creditor to the claims in alphabetical order achan order to the claims in alphabetical order achan order to the claims in alphabetical order achan order to the claims in alphabetical order to the claims	a creditor has more than oth priority and nonprioric coording to the creditor's ular claim, list the other continuous and the continuous and the continuous and the continuous and the continuous according to the continuous acco	ty amounts, list that claim here a name. If you have more than two creditors in Part 3.	and show both priority a	and nonpriority amount aims, fill out the Cont	nts. As much as inuation Page of
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 Do any creditor No. Go to Pa Yes. List all of your identify what type possible, list the Part 1. If more the (For an explanate) IRS Priority Creation 1040 Wa 	I of Your PRIORITY Unsectors have priority unsecured claims. If a claim has be claims in alphabetical order ach han one creditor holds a particution of each type of claim, see diditor's Name averly Avenue	a creditor has more than oth priority and nonprioriccording to the creditor's ular claim, list the other of the instructions for this form.	ty amounts, list that claim here a name. If you have more than two creditors in Part 3.	and show both priority a o priority unsecured cl	and nonpriority amount aims, fill out the Cont	Nonpriority amount
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 Do any creditor No. Go to Pa Yes. List all of your identify what type possible, list the Part 1. If more the (For an explanate) Friority Creation of the Company o	I of Your PRIORITY Unsectors have priority unsecured claims. If a claim has be claims in alphabetical order ach han one creditor holds a particution of each type of claim, see diditor's Name averly Avenue	a creditor has more than oth priority and nonprioric cording to the creditor's ular claim, list the other of the instructions for this form. Last 4 digits When was the As of the date	ty amounts, list that claim here a name. If you have more than two creditors in Part 3. orm in the instruction booklet.) of account number e debt incurred? e you file, the claim is: Check a	and show both priority a priority and show both priority unsecured cl Total claim \$0.00	and nonpriority amount aims, fill out the Content of Priority amount	Nonpriority amount
 Do any creditor No. Go to Pa Yes. List all of your identify what type possible, list the Part 1. If more the (For an explanate) Friority Creation of the Company o	rs have priority unsecured claims. If e of claim it is. If a claim has be claims in alphabetical order ach han one creditor holds a particution of each type of claim, see the claims in alphabetical order ach han one creditor holds a particution of each type of claim, see the claim it is in alphabetical order ach han one creditor holds a particution of each type of claim, see the claim it is in alphabetical order ach han one creditor holds a particution of each type of claim, see the claim is in alphabetical order. It is in a claim in a claim is in a claim	a creditor has more than oth priority and nonprioric coording to the creditor's ular claim, list the other of the instructions for this form. Last 4 digits When was the As of the date	ty amounts, list that claim here at name. If you have more than two reditors in Part 3. form in the instruction booklet.) of account number e debt incurred? e you file, the claim is: Check at	and show both priority a priority and show both priority unsecured cl Total claim \$0.00	and nonpriority amount aims, fill out the Content of Priority amount	Nonpriority amount
 Do any creditor No. Go to Pa Yes. List all of your identify what type possible, list the Part 1. If more the (For an explanate) IRS Priority Creation of the Part 1. If Manual of the Part 1. If more 1. If	I of Your PRIORITY Unsectors have priority unsecured claims. If e of claim it is. If a claim has be claims in alphabetical order ach an one creditor holds a particution of each type of claim, see the order of the	a creditor has more than oth priority and nonprioriccording to the creditor's ular claim, list the other of the instructions for this fellows. Last 4 digits When was the As of the date Contingen: Contingen:	ty amounts, list that claim here at name. If you have more than two reditors in Part 3. form in the instruction booklet.) of account number e debt incurred? e you file, the claim is: Check at	and show both priority a priority and show both priority unsecured cl Total claim \$0.00	and nonpriority amount aims, fill out the Content of Priority amount	Nonpriority amount
 Do any creditor No. Go to Pa Yes. List all of your identify what type possible, list the Part 1. If more the (For an explanat) IRS Priority Creed 1040 Wale Holtsville Number Streed Who incurred Debtor 1 or Debtor 2 or 	I of Your PRIORITY Unsectors have priority unsecured claims. If e of claim it is. If a claim has be claims in alphabetical order act and one creditor holds a particution of each type of claim, see the control of the	a creditor has more than oth priority and nonprioriccording to the creditor's ular claim, list the other of the instructions for this feat 4 digits Last 4 digits When was the As of the date Contingent Unliquidate Disputed	ty amounts, list that claim here at name. If you have more than two reditors in Part 3. form in the instruction booklet.) of account number e debt incurred? e you file, the claim is: Check at	and show both priority a priority and show both priority unsecured cl Total claim \$0.00	and nonpriority amount aims, fill out the Content of Priority amount	Nonpriority amount
 Do any creditor No. Go to Pa Yes. List all of your identify what type possible, list the Part 1. If more the (For an explanate) IRS Priority Creet 1040 Wa Holtsville Number Str Who incurred Debtor 1 or Debtor 2 or Debtor 1 ar 	I of Your PRIORITY Unsectors have priority unsecured claims. If e of claim it is. If a claim has be claims in alphabetical order ach han one creditor holds a particution of each type of claim, see the order of the	a creditor has more than oth priority and nonprioric cording to the creditor's ular claim, list the other of the instructions for this form. Last 4 digits When was the As of the date Contingent Unliquidate Type of PRIO	ty amounts, list that claim here a name. If you have more than two creditors in Part 3. orm in the instruction booklet.) of account number e debt incurred? e you file, the claim is: Check at ted	and show both priority a priority and show both priority unsecured cl Total claim \$0.00	and nonpriority amount aims, fill out the Content of Priority amount	Nonpriority amount
1. Do any creditor No. Go to Pa Yes. 2. List all of your identify what type possible, list the Part 1. If more the (For an explanat) IRS Priority Creet 1040 Wale Holtsville Number Street Who incurred Debtor 1 or Debtor 2 or At least one	I of Your PRIORITY Unsectors have priority unsecured claims. If e of claim it is. If a claim has be claims in alphabetical order ach an one creditor holds a particution of each type of claim, see the eyerly Avenue e, NY 11742 reet City State Zip Code the debt? Check one.	a creditor has more than oth priority and nonprioriccording to the creditor's ular claim, list the other of the instructions for this feature. Last 4 digits. When was the As of the date Contingent Unliquidate Unliquidate Type of PRIO	ty amounts, list that claim here a name. If you have more than two reditors in Part 3. orm in the instruction booklet.) of account number e debt incurred? e you file, the claim is: Check at the debt incurred claim: support obligations	Total claim \$0.00 All that apply	and nonpriority amount aims, fill out the Content of Priority amount	Nonpriority amount
1. Do any creditor No. Go to Pa Yes. 2. List all of your identify what type possible, list the Part 1. If more the (For an explanat) IRS Priority Creet 1040 Wale Holtsville Number Street Who incurred Debtor 1 or Debtor 2 or Debtor 1 ar At least one	rs have priority unsecured claims. If e of claim it is. If a claim has be claims in alphabetical order act and one creditor holds a particution of each type of claim, see exertly Avenue le, NY 11742 reet City State Zip Code the debt? Check one. Inly Inly Inly In of Your PRIORITY Unsecured Claims. If e of claims in alphabetical order act and one creditor holds a particution of each type of claim, see exertly Avenue le, NY 11742 reet City State Zip Code the debt? Check one. Inly Inly Inly In of Your PRIORITY Unsecured Claims. If e of the debtors and another and so the community of the community of the community of the community of the debtors and another and so community of the community of the debtors and community of the community of th	a creditor has more than oth priority and nonprioriccording to the creditor's ular claim, list the other of the instructions for this feat 4 digits Last 4 digits When was the As of the date Contingent Unliquidate Disputed Type of PRIO Domestic state Taxes and	ty amounts, list that claim here as name. If you have more than two creditors in Part 3. orm in the instruction booklet.) of account number e debt incurred? e you file, the claim is: Check at the debt incurred claim: support obligations I certain other debts you owe the	Total claim *0.00 Total claim \$0.00	and nonpriority amount aims, fill out the Content of Priority amount	Nonpriority amount
1. Do any creditor No. Go to Pa Yes. 2. List all of your identify what type possible, list the Part 1. If more the (For an explanat) IRS Priority Creet 1040 Wale Holtsville Number Street Who incurred Debtor 1 or Debtor 2 or Debtor 1 ar At least one	I of Your PRIORITY Unsectors have priority unsecured claims. If e of claim it is. If a claim has be claims in alphabetical order ach an one creditor holds a particution of each type of claim, see the eyerly Avenue e, NY 11742 reet City State Zip Code the debt? Check one.	a creditor has more than oth priority and nonprioriccording to the creditor's ular claim, list the other of the instructions for this feat 4 digits Last 4 digits When was the As of the date Contingent Unliquidate Disputed Type of PRIO Domestic state Taxes and	ty amounts, list that claim here as name. If you have more than two reditors in Part 3. form in the instruction booklet.) of account number e debt incurred? e you file, the claim is: Check at the debt incurred claim: support obligations I certain other debts you owe the death or personal injury while you	Total claim *0.00 Total claim \$0.00	and nonpriority amount aims, fill out the Content of Priority amount	Nonpriority amount

Debto	Thomas E. Sobczak, Jr.		Case number (if known)	
2.2	New York State	Last 4 digits of account number	\$0.00	\$0.00 \$0.00
	Priority Creditor's Name Dept of Taxation & Financ P.O. Box 5300 Albany, NY 12205-0300	When was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim is:	Check all that apply	
١	Who incurred the debt? Check one.	☐ Contingent		
ı	Debtor 1 only	☐ Unliquidated		
[Debtor 2 only	☐ Disputed		
[Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:		
	☐ At least one of the debtors and another	☐ Domestic support obligations		
[☐ Check if this claim is for a community debt	Taxes and certain other debts you	owe the government	
	s the claim subject to offset?	☐ Claims for death or personal injury	while you were intoxicated	
I	No	☐ Other. Specify		
[☐Yes	Tax debt		
4. Lis	Yes. st all of your nonpriority unsecured claims in the issecured claim, list the creditor separately for each clain one creditor holds a particular claim, list the other art 2.	aim. For each claim listed, identify what t	ype of claim it is. Do not list claims already	included in Part 1. If more
				Total claim
4.1	Amex	Last 4 digits of account number	2513	\$2,970.00
	Nonpriority Creditor's Name P.o. Box 981537 El Paso, TX 79998	When was the debt incurred?	Opened 12/90 Last Active 6/25/19	_
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	 Obligations arising out of a sepa report as priority claims 	ration agreement or divorce that you did no	ot
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	□Yes	Other. Specify Credit Card	l	

Debtor	1 Thomas E. Sobczak, Jr.		Case number (if knov	vn)	
4.2	Bank Of America	Last 4 digits of account number	1991		\$5,920.00
	Nonpriority Creditor's Name Po Box 982238 El Paso, TX 79998	When was the debt incurred?	Opened 08/03 6/13/19	Last Active	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	1	
	Debtor 1 only	☐ Contingent			
	□ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecure	d claim:		
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No	☐ Student loans ☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharing	ıration agreement or di	•	
	Yes	Other. Specify Credit Card			
4.3	Dept Of Ed/navient	Last 4 digits of account number	1211		\$34,732.00
	Nonpriority Creditor's Name Po Box 9635 Wilkes Barre, PA 18773	When was the debt incurred?	Opened 12/15 6/30/19	Last Active	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	1	
	■ Debtor 1 only	Contingent			
	☐ Debtor 2 only	Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	d alabas		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	a ciaim:		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Student loansObligations arising out of a separeport as priority claims	ıration agreement or di	ivorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other sim	ilar debts	
	Yes	☐ Other. Specify			
		Educationa	ıl		
4.4	Dept Of Ed/navient Nonpriority Creditor's Name	Last 4 digits of account number	0921		\$32,578.00
	Po Box 9635 Wilkes Barre, PA 18773	When was the debt incurred?	Opened 09/16 6/30/19	Last Active	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	1	
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	-	·	
	No	Debts to pension or profit-sharin	g plans, and other sim	ilar debts	
	Yes	Other. Specify	.1		
		Educationa	li		

Debtor	Thomas E. Sobczak, Jr.		Case number (if known)	
4.5	Dept Of Ed/navient Nonpriority Creditor's Name	Last 4 digits of account number	0921	\$32,193.00
	Po Box 9635 Wilkes Barre, PA 18773	When was the debt incurred?	Opened 09/17 Last Active 6/30/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	☐ Other. Specify		
		Educationa	ıl	
4.6	Dept Of Ed/navient Nonpriority Creditor's Name	Last 4 digits of account number	<u>1101</u>	\$17,838.00
	Po Box 9635 Wilkes Barre, PA 18773	When was the debt incurred?	Opened 11/13 Last Active 10/11/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	<u>_</u>	☐ Contingent		
	Debtor 1 only	☐ Unliquidated		
	Debtor 2 only	☐ Disputed		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	d claim:	
	At least one of the debtors and another	Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		Educationa	ıl	
4.7	Dept Of Ed/navient Nonpriority Creditor's Name	Last 4 digits of account number	0905	\$14,862.00
	Po Box 9635 Wilkes Barre, PA 18773	When was the debt incurred?	Opened 09/14 Last Active 10/11/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		Educationa	ıl	

Debto	Thomas E. Sobczak, Jr.		Case number (if known)	
4.8	Dept Of Ed/navient Nonpriority Creditor's Name	Last 4 digits of account number	1209	\$13,054.00
	Po Box 9635 Wilkes Barre, PA 18773	When was the debt incurred?	Opened 12/15 Last Active 10/11/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated		
	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		Educationa	<u>II </u>	
4.9	Dept Of Ed/navient Nonpriority Creditor's Name	Last 4 digits of account number	0410	\$4,563.00
	Po Box 9635 Wilkes Barre, PA 18773	When was the debt incurred?	Opened 04/13 Last Active 10/11/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		Educationa	<u>I</u>	
4.1	Discover Fin Svcs Llc Nonpriority Creditor's Name	Last 4 digits of account number	9981	\$17,076.00
	Pob 15316 Wilmington, DE 19850	When was the debt incurred?	Opened 08/07 Last Active 6/23/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Credit Card		
	· = =	- Outer Specify		

Debtor	1 Thomas E. Sobczak, Jr.		Case number (if known)	
4.1 1	Goodyear Tire/cbna	Last 4 digits of account number	5595	\$1,925.00
	Nonpriority Creditor's Name Po Box 6497 Sioux Falls, SD 57117 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim i	Opened 04/16 Last Active 6/23/19 s: Check all that apply	
	Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt		I claim: ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.1	Jpmcb Card Nonpriority Creditor's Name	Last 4 digits of account number	3743	\$4,621.00
	Po Box 15369 Wilmington, DE 19850	When was the debt incurred?	Opened 12/14 Last Active 6/07/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.1	Jpmcb Card Nonpriority Creditor's Name	Last 4 digits of account number	9624	\$3,696.00
	Po Box 15369 Wilmington, DE 19850	When was the debt incurred?	Opened 08/02 Last Active 6/13/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	a plane, and other similar debte	
	■ No	· · ·		
	☐ Yes	Other. Specify Credit Card		

Debto	Thomas E. Sobczak, Jr.		Case number (if known)	
4.1	Jpmcb Card Nonpriority Creditor's Name	Last 4 digits of account number	4092	\$3,586.00
	Po Box 15369 Wilmington, DE 19850	When was the debt incurred?	Opened 06/06 Last Active 6/13/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.1 5	Jpmcb Card	Last 4 digits of account number	5151	\$634.00
	Nonpriority Creditor's Name Po Box 15369 Wilmington, DE 19850	When was the debt incurred?	Opened 09/04 Last Active 6/13/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.1 6	Td Bank N.a. Nonpriority Creditor's Name	Last 4 digits of account number	3037	\$20.00
	32 Chestnut St Lewiston, ME 04240	When was the debt incurred?	Opened 11/08 Last Active 6/15/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharin		
	☐ Yes	■ Other. Specify Check Cred	lit Or Line Of Credit	

Debtor 1	Thomas E	E. Sobczak, Jr.		Case no	umber (if known)	
4.1 V	erizon		Last 4 digits of account number	0001		\$323.00
	onpriority Cred	litor's Name				
	00 Techno Veldon Spr	logy Dr ing, MO 63304	When was the debt incurred?	Oper 11/16	ned 06/09 Last Active 6/18	-
		City State Zip Code	As of the date you file, the claim	is: Checl	k all that apply	
W	/ho incurred t	he debt? Check one.				
	Debtor 1 onl	у	☐ Contingent			
	Debtor 2 onl	у	☐ Unliquidated			
	Debtor 1 and	d Debtor 2 only	☐ Disputed			
	At least one	of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	Check if this	s claim is for a community	☐ Student loans			
	ebt the claim sul	bject to offset?	Obligations arising out of a separeport as priority claims	aration ag	greement or divorce that you did not	
	No		Debts to pension or profit-sharing	ıg plans,	and other similar debts	
] Yes		Other Specify Agriculture			
						-
0	erizon		Last 4 digits of account number	8001		\$323.95
14	onpriority Cred 40 West St lew York, N	reet	When was the debt incurred?	2019		-
		City State Zip Code	As of the date you file, the claim	is: Check	k all that apply	
w	/ho incurred t	he debt? Check one.				
	Debtor 1 onl	у	☐ Contingent			
	Debtor 2 onl	у	☐ Unliquidated			
	Debtor 1 and	d Debtor 2 only	☐ Disputed			
	At least one	of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	Check if this	s claim is for a community	☐ Student loans			
	ebt the claim sul	bject to offset?	Obligations arising out of a separeport as priority claims	aration ag	greement or divorce that you did not	
_	No	5,000 10 0110011	Debts to pension or profit-sharing	ıg plans,	and other similar debts	
] Yes		■ Other. Specify Account de	eficien	су	
						-
Part 3:	List Others	to Be Notified About a Debi	That You Already Listed			
is trying have mo	to collect fro re than one c for any debts	m you for a debt you owe to son		Parts 1	or 2, then list the collection agenc	y here. Similarly, if you
			s. This information is for statistical r	eporting	purposes only. 28 U.S.C. §159. Ad	d the amounts for each
type of u	insecured cla	im.				
					Total Claim	
Tot	6a. t al	Domestic support obligations		6a.	\$	_
claim from Part		Taxes and certain other debts	you owe the government	6b.	¢ 0.00	
IIOIII Fait	6c.	· ·	jury while you were intoxicated	6c.	\$ <u>0.00</u> \$ 0.00	_
	6d.	•	cured claims. Write that amount here.	6d.	\$ 0.00	_
		Table 4 Alle of	1.01	0		-
	6e.	Total Priority. Add lines 6a throu	ıgıı oa.	6e.	\$0.00	
					Total Claim	
Tet	6f.	Student loans		6f.	\$ 149,820.00	_
Tot claim	ns					
from Part	t 2 6g.	Obligations arising out of a segou did not report as priority c	paration agreement or divorce that	6g.	\$ 0.00	
	6h.		ing plans, and other similar debts	6h.	\$	_

Debtor 1	Thomas I	E. Sobczak, Jr.	Case number (if known)					
					0.00			
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	41,094.95			
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	190,914.95			

Fill in this infor	mation to identify your	case:			
Debtor 1	Thomas E. Sobca	zak, Jr.			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name	_	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F NEW YORK		
Case number					
(if known)					Check if this is an
					amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	Name, Number	whom you have the r, Street, City, State and ZIF	e contract or lease ^o Code	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.5					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_

Official Form 106G

Fill in this	information to identify you	ır case:			
Debtor 1	Thomas E. Sobo	czak, Jr.			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fili	ing) First Name	Middle Name	Last Name		
(Opouse II, III	ing) That Name				
United Sta	ates Bankruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK		
Case num	ber				
(if known)				☐ Check if this is ar	า
				amended filing	
Officia	l Form 106H				
		al a la Cana			
Sched	dule H: Your Co	aeptors		1	2/15
	e and case number (if know you have any codebtors? (, , ,		e as a codebtor.	
=					
■ No □ Yes	_				
⊔ Yes	5				
	hin the last 8 years, have yo na, California, Idaho, Louisian			ry? (Community property states and territories includington, and Wisconsin.)	е
■ No	. Go to line 3.				
`	s. Did your spouse, former sp	ouse, or legal equivalent live	with you at the time?		
			·		
in line Form	e 2 again as a codebtor only	y if that person is a guaran	tor or cosigner. Make	r if your spouse is filing with you. List the person sure you have listed the creditor on Schedule D (06G). Use Schedule D, Schedule E/F, or Schedule	(Official
	Column 1: Your codebtor Name, Number, Street, City, State and	I ZID Codo		Column 2: The creditor to whom you owe the	e debt
	ivame, ivamber, direct, dity, diate and	7211 Code		Check all schedules that apply:	
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
-	Number Street			_	
	City	State	ZIP Code		
3.2				☐ Schedule D, line	
0.2	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
-	Number Street			_	
	City	State	ZIP Code		

Official Form 106H Schedule H: Your Codebtors Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Fill	in this information to identify your o	case:				Ī				
Deb	otor 1 Thomas E.	Sobczak, Jr.								
	otor 2				_					
Uni	ted States Bankruptcy Court for the	e: EASTERN DISTRICT	OF NEW YORK		_					
	se number		-					ed filing ent sho	wing postpetition e following date:	chapter
<u>O</u> 1	fficial Form 106I					Ī	/M / DD/ \	YYY	-	
So	chedule I: Your Inc	ome								12/15
sup spo atta	as complete and accurate as posplying correct information. If you use. If you are separated and you have separated sheet to this form. Describe Employment	i are married and not fili ur spouse is not filing w On the top of any additi	ng jointly, and your ith you, do not inclu	spouse i ide infori	s liv natio	ing with on abou	you, incl t your spo	ude inf ouse. If	ormation about more space is	your needed,
1.	Fill in your employment information.		Debtor 1				Debtor 2	2 or no	n-filing spouse	
	If you have more than one job,	Employment status	☐ Employed				■ Empl	oyed		
	attach a separate page with information about additional	Employment status	■ Not employed				☐ Not e	mploye	d	
	employers.	Occupation	Unemployed				Assista	nt Sto	re Manager	
	Include part-time, seasonal, or self-employed work.	Employer's name					Buy Bu	ıy Bab	у	
	Occupation may include student or homemaker, if it applies.	Employer's address					PO BO			
		How long employed t	here?				_3	mont	hs	
Par	Give Details About Mo	nthly Income								
	mate monthly income as of the ouse unless you are separated.	late you file this form. If	you have nothing to r	eport for	any	line, write	e \$0 in the	space.	Include your nor	n-filing
	u or your non-filing spouse have m e space, attach a separate sheet to		ombine the informatio	on for all e	emplo	oyers for	that perso	on on th	e lines below. If y	ou need
						For De	btor 1		Debtor 2 or -filing spouse	
2.	List monthly gross wages, sale deductions). If not paid monthly,			2.	\$		0.00	\$	4,743.29	
3.	Estimate and list monthly over	time pay.		3.	+\$		0.00	+\$	0.00	
4.	Calculate gross Income. Add I	ne 2 + line 3.		4.	\$		0.00	\$	4,743.29	

Official Form 106l Schedule I: Your Income page 1

Debt	or 1	Thomas E. Sobczak, Jr.		Case	number (if k	nown)				
	Con	ny line 4 hore	4.	For	Debtor 1	2.00		Debtor 2	ouse]
	Cop	y line 4 here	4.	Φ_		0.00	Φ_	4,	743.29	_
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.			0.00	\$_		373.17	_
	5b.	Mandatory contributions for retirement plans	5b.			0.00	\$_		0.00	_
	5c. 5d.	Voluntary contributions for retirement plans Required repayments of retirement fund loans	5c. 5d.			0.00	\$_ \$		0.00	_
	5u. 5e.	Insurance	5u. 5e.	- : -		0.00	\$ 		0.00	_
	5f.	Domestic support obligations	5f.	\$_		0.00	\$ -		0.00	_
	5g.	Union dues	5g.	i —		0.00	\$_		0.00	_
	5h.	Other deductions. Specify:	5h.	. —		0.00	+ \$		0.00	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$		0.00	\$	8	373.17	
7.	Calo	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$		0.00	\$	3,8	370.12	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								_
		monthly net income.	8a.		(0.00	\$		0.00	_
	8b.	Interest and dividends	8b.	\$		0.00	\$		0.00	<u> </u>
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$		0.00	\$		0.00	
	8d.	Unemployment compensation	8d.			0.00	\$ -		0.00	_
	8e.	Social Security	8e.	· · · · ·		0.00	\$-		0.00	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$		0.00	\$		0.00	_
	8g.	Pension or retirement income	_ 8g.	\$		0.00	\$		0.00	_
	8h.	Other monthly income. Specify:	_ 8h.	+ \$_		0.00	+ \$ _		0.00	_
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		0.00	\$_		0.0	0
10.	Calo	culate monthly income. Add line 7 + line 9.	10.	 6	0.00	+ \$	3 2	370.12	= \$	3,870.12
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			0.00		٥,٠	37 0.12	-	3,070.12
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depe	•	•			Schedule 11.	4	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The res e that amount on the Summary of Schedules and Statistical Summary of Certainies						12.	\$	3,870.12
12	Do:	you expect an increase or decrease within the year often you file this form.	2							ly income
13.		you expect an increase or decrease within the year after you file this form' No. Yes. Explain:	·							

Official Form 106l Schedule I: Your Income page 2

Fill	in this information to identify yo	our case:					
Deb	otor 1 Thomas E. S	Sobczak,	Jr.		Check	c if this is:	
					_	An amended filing	
1	otor 2 ouse, if filing)					A supplement shov I3 expenses as of	ving postpetition chapter the following date:
Unit	ted States Bankruptcy Court for the	: EASTE	RN DISTRICT OF NEW YO	ORK		MM / DD / YYYY	
	e number nown)						
_							
	fficial Form 106J						
	chedule J: Your			a filia a ta aathaa ha	- 4h	II	12/15
info	as complete and accurate as ormation. If more space is ne nber (if known). Answer ever	eded, atta	ich another sheet to this				
Par 1.	t 1: Describe Your House Is this a joint case?	hold					
	No. Go to line 2.						
	Yes. Does Debtor 2 live	in a separ	ate household?				
	☐ No ☐ Yes. Debtor 2 mus	st file Offic	ial Form 106J-2, <i>Expenses</i>	for Separate House	hold of Debto	or 2.	
2.	Do you have dependents?	□ No					
	Do not list Debtor 1 and Debtor 2.	■ Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not state the						□ No
	dependents names.			Daughter		14	■ Yes
				Daughter with	Autism	22	□ No ■ Yes
							□ No
							Yes
							□ No
3.	Do your expenses include	_				-	☐ Yes
0.	expenses of people other t yourself and your depende	han _	No Yes				
	t 2: Estimate Your Ongoi						
exp	imate your expenses as of your enses as of a date after the bolicable date.						
	lude expenses paid for with						
	value of such assistance an ficial Form 106l.)	d have in	cluded it on Schedule I: Y	our Income	-	Your expe	enses
4.	The rental or home owners payments and any rent for the		•	nclude first mortgage	4. \$		1,809.23
	If not included in line 4:						
	4a. Real estate taxes				4a. \$		0.00
	4b. Property, homeowner's	s, or rente	's insurance		4b. \$		0.00
	4c. Home maintenance, re	•			4c. \$		125.00
5.	4d. Homeowner's associate Additional mortgage payments			me equity losss	4d. \$ 5. \$		0.00
J.	Additional mortgage paym	ento ioi y	our residerice, Such as no	me equity loans	э. ф		321.78

eb	or 1 Thomas E. Sobczak, Jr.	Case num	ber (if known)	
	Utilities:			
	6a. Electricity, heat, natural gas	6a.	\$	420.00
	6b. Water, sewer, garbage collection	6b.	\$	35.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	460.00
	6d. Other. Specify:	6d.	\$	0.00
	Food and housekeeping supplies	7.	\$	1,200.00
	Childcare and children's education costs	8.	\$	100.00
	Clothing, laundry, and dry cleaning	9.	\$	150.00
	Personal care products and services	10.	\$	200.00
	Medical and dental expenses	11.	\$	100.00
	Transportation. Include gas, maintenance, bus or train fare.			F40.00
	Do not include car payments.	12.	·	510.00
	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	·	150.00
	Charitable contributions and religious donations	14.	\$	0.00
	Insurance.			
	Do not include insurance deducted from your pay or included in lines 4 or 20.	45-	Φ.	
	15a. Life insurance	15a.	·	0.00
	15b. Health insurance	15b.	·	0.00
	15c. Vehicle insurance	15c.	· -	332.00
	15d. Other insurance. Specify:	15d.	\$	0.00
	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00
	Installment or lease payments:			_
	17a. Car payments for Vehicle 1	17a.	· -	266.84
	17b. Car payments for Vehicle 2	17b.	·	0.00
	17c. Other. Specify:	17c.	\$	0.00
	17d. Other. Specify:	17d.	\$	0.00
	Your payments of alimony, maintenance, and support that you did not report deducted from your pay on line 5, Schedule I, Your Income (Official Form 106		\$	0.00
	Other payments you make to support others who do not live with you. Specify:	19.	\$	0.00
	Other real property expenses not included in lines 4 or 5 of this form or on So		our Income	
	20a. Mortgages on other property	20a.		0.00
	20b. Real estate taxes	20b.		0.00
	20c. Property, homeowner's, or renter's insurance	20c.		0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	·	0.00
	20e. Homeowner's association or condominium dues	20a. 20e.	·	0.00
	Other: Specify: Pet Expense		+\$	100.00
	· · · · · · · · · · · · · · · · · · ·		+\$	50.00
	Gym Membership Calculate your monthly expenses		φ	50.00
	22a. Add lines 4 through 21.		\$	6,329.85
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-	-2	\$	
	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	6,329.85
	Calculate your monthly net income.			
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,870.12
	23b. Copy your monthly expenses from line 22c above.	23b.	-\$	6,329.85
	23c. Subtract your monthly expenses from your monthly income.	23c.	\$	-2,459.73

Explain here: Debtor will be starting new job August 12, 2019 Yes.

Fill in this info	ormation to identify your	case:					
Debtor 1	Thomas E. Sobo						
	First Name	Middle Name	Last Name				
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name				
United States E	Bankruptcy Court for the:	EASTERN DISTRICT	OF NEW YORK				
Case number							
(if known)					☐ Check if this is an amended filing		
Official For	rm 106Dec						
Declara	tion About a	an Individua	I Debtor's Sch	nedules	12/15		
obtaining mone years, or both.		n connection with a bar			ement, concealing property, or 00, or imprisonment for up to 20		
Did you p	pay or agree to pay some	eone who is NOT an atto	orney to help you fill out bar	nkruptcy forms?			
■ No							
☐ Yes.	Name of person				Bankruptcy Petition Preparer's Notice, tion, and Signature (Official Form 119)		
	nalty of perjury, I declare are true and correct.	that I have read the sui	mmary and schedules filed	with this declaration	on and		
X /s/ Th	nomas E. Sobczak, Jr.		X				
Thom	nas E. Sobczak, Jr. ture of Debtor 1		Signature of Do	ebtor 2			
Date	July 29, 2019		Date				

Official Form 106Dec

FilLin	this infor	mation to identify you	case:						
Debto									
Debloi	ı	Thomas E. Sobo	Middle Name	Last Name					
Debto		First Name	Middle Nome	Lost Nome					
(Spouse	ir, filing)	First Name	Middle Name	Last Name					
United	States B	ankruptcy Court for the:	EASTERN DISTRICT OF	F NEW YORK					
Case r	number n)				_	Check if this is an amended filing			
		orm 107 t of Financial	Affairs for Indivi	duals Filing for E	Bankruptcv	4/19			
Be as d information	complete ation. If i	and accurate as possi nore space is needed, n). Answer every ques	ble. If two married people attach a separate sheet to stion.	are filing together, both are this form. On the top of an	equally responsible for sup y additional pages, write yo	plying correct			
Part 1	Give	Details About Your Ma	rital Status and Where You	u Lived Before					
1. W	hat is you	ır current marital statu	s?						
	Marrie Not ma	-							
2. Dı	uring the	last 3 years, have you	lived anywhere other than	where you live now?					
			•	•					
	No Voc Li	et all of the places you li	wad in the last 2 years. Do n	ot include where you live nov					
		. ,	ŕ						
D	ebtor 1 F	rior Address:	Dates Debtor 1 lived there	Debtor 2 Prior A	ddress:	Dates Debtor 2 lived there			
					nity property state or territor tico, Texas, Washington and V				
	■ No								
	Yes. M	ake sure you fill out Sch	nedule H: Your Codebtors (C	fficial Form 106H).					
Part 2	Expla	nin the Sources of You	r Income						
Fil	I in the to	al amount of income yo	u received from all jobs and	ng a business during this y all businesses, including part re together, list it only once u		ndar years?			
	l No								
	Yes. F	III in the details.							
			Debtor 1		Debtor 2				
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)			
From January 1 of current year until the date you filed for bankruptcy:			■ Wages, commissions, bonuses, tips	\$26,738.45	☐ Wages, commissions, bonuses, tips				
			☐ Operating a business		☐ Operating a business				

Official Form 107

Debtor 1 Thomas E. Sobczak, Jr.				Case number (if known)								
					Debtor 1					Debtor 2		
					Sources of Check all t		(be	oss income fore deductions a clusions)	and	Sources of income Check all that a		Gross income (before deductions and exclusions)
			dar year: December	31, 2018)	■ Wages, bonuses, ti	commissions,		\$80,995	5.00	☐ Wages, com bonuses, tips	missions,	
					☐ Operati	ng a business				Operating a	business	
			dar year bei December		■ Wages, bonuses, ti	commissions,		\$107,060	0.00	☐ Wages, com bonuses, tips	missions,	
					☐ Operati	ng a business				☐ Operating a	business	
	and winn	other iings. each s	public benef If you are fili	it payments; ng a joint cas he gross inco	pensions; re se and you ha	ntal income; inter ave income that y	est; di /ou red	vidends; money ceived together, I	collecte list it on		royalties; an ebtor 1.	ecurity, unemployment, d gambling and lottery
					Debtor 1					Debtor 2		
					Sources of Describe be		eac (be	oss income fron th source fore deductions a clusions)		Sources of incorporation Describe below.		Gross income (before deductions and exclusions)
Par	rt 3:	List	Certain Pa	yments You	Made Befor	e You Filed for	Bankr	uptcy				
6.	Are □	No.	Neither De individual puring the No. Yes	ebtor 1 nor D primarily for a 90 days befo Go to line 7 List below e paid that cre not include to adjustment or Debtor 2 o	personal, far personal, far you filed for each creditor. Do not payments to ton 4/01/22 or both have	mily, or household for bankruptcy, distributed to whom you paint include payment an attorney for the and every 3 years primarily consu	d you d a total to bar safter	pay any creditor al of \$6,825* or r domestic suppor hkruptcy case. that for cases file	a total of total of total on the desired and t	of \$6,825* or more pay titions, such as cher after the date of	re? ments and ti ild support a f adjustment	1(8) as "incurred by an he total amount you and alimony. Also, do
			■ No. □ Yes	Go to line 7 List below e include pay	ach creditor	to whom you pai	d a tot	al of \$600 or mo	re and	of \$600 or more? the total amount yort and alimony. <i>F</i>	you paid tha	t creditor. Do not include payments to an
	Cre	ditor'	s Name and	d Address		Dates of payme	ent	Total amou	ınt aid	Amount you still owe	Was this p	payment for
								·				

	THOMAS E. SUDCZAK, JI.			C Humber (# known)		
7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general prof which you are an officer, director, person in a business you operate as a sole proprietor. A alimony.	artners; relatives of any gen n control, or owner of 20% o	eral partners; partner r more of their voting	erships of which you	ou are a genera ny managing a	al partner; corporations agent, including one fo
	■ No □ Yes. List all payments to an insider.					
	Yes. List all payments to an insider. Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for	this payment
			paid	still owe		
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cost		ments or transfer a	iny property on a	ccount of a d	ebt that benefited an
	No					
	Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name
Par	rt 4: Identify Legal Actions, Repossessio	ns, and Foreclosures				
_	Wishing 4 years before you filed for bonky and	tou ware van a nortuin an	v lavovit accest acc	tian aradminist	rativa muaaaa	lina?
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.					
	□ No					
	Yes. Fill in the details.					
	Case title Case number	Nature of the case Court or agency			Status of th	ne case
	LoanCare V Sobczak 2018-611681	Foreclosure	Nassau County 100 Supreme C Mineola, NY 11	ourt Drive	■ Pending □ On appe □ Conclud	eal
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo		erty repossessed, fo	oreclosed, garnis	shed, attached	d, seized, or levied?
	No. Go to line 11.					
	☐ Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happened	d			р. оролу
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment bed No Yes. Fill in the details.		luding a bank or fin	nancial institution	n, set off any a	amounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date	action was	Amount
				taker	1	
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a ■ No □ Yes		erty in the possessi	ion of an assigne	e for the bend	efit of creditors, a

Official Form 107

Deb	otor 1 Thomas E. Sobczak, Jr.	Case number	(if known)	
Par	t 5: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankruptc ■ No □ Yes. Fill in the details for each gift.	y, did you give any gifts with a total value of more t	han \$600 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	■ No	y, did you give any gifts or contributions with a tota	ıl value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or contrib	oution.		
	Gifts or contributions to charities that total more than \$600 Charity's Name	Describe what you contributed	Dates you contributed	Value
Do	Address (Number, Street, City, State and ZIP Code)			
Par	t 6: List Certain Losses			
15.	Within 1 year before you filed for bankruptcy or gambling? ■ No	or since you filed for bankruptcy, did you lose any	hing because of thef	t, fire, other disaster,
	☐ Yes. Fill in the details.			
		cribe any insurance coverage for the loss	Date of your	Value of property
		ude the amount that insurance has paid. List pending rance claims on line 33 of Schedule A/B: Property.	loss	lost
Par	t 7: List Certain Payments or Transfers			
16.	consulted about seeking bankruptcy or prepare	did you or anyone else acting on your behalf pay or aring a bankruptcy petition? Ters, or credit counseling agencies for services required		rty to anyone you
	□ No			
	Yes. Fill in the details.			
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was	Amount of payment
	Email or website address Person Who Made the Payment, if Not You		made	
	Aronow Law, PC 20 Crossways Park Drive North Suite 210 Woodbury, NY 11797	Attorney Fees	July 2019	\$2,000.00
	Hanin.S@AronowLaw.com			
17.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors. Do not include any payment or transfer that you		or transfer any prope	rty to anyone who
	■ No			
	Yes. Fill in the details.			
	Person Who Was Paid	Description and value of any property	Date payment	Amount of
	Address	transferred	or transfer was	payment

Debtor 1 Thomas E. Sobczak, Jr.

Case number (if known)

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.						
	Person Who Received Transfer Address Person's relationship to you	Description and v property transferr			y property or eceived or debts nange	Date transfer was made	
19.	 Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. 						
	Name of trust	Description and v	alue of the prope	rty transferred	i	Date Transfer was made	
	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, association.	y, were any financial ac	counts or instrun	nents held in y	, ,	, ,	
	Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accoun instrument	close	account was ed, sold, ed, or sferred	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 y cash, or other valuables? No Yes. Fill in the details.	ear before you filed for		·	·	ory for securities,	
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		escribe the co	ontents	Do you still have it?	
22.	Have you stored property in a storage unit o ■ No □ Yes. Fill in the details.	r place other than your	home within 1 ye	ear before you	filed for bankruptc	y?	
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)	-	escribe the co	ontents	Do you still have it?	
Par	t 9: Identify Property You Hold or Control	for Someone Else					
23.	Do you hold or control any property that sor for someone. No Yes. Fill in the details.	meone else owns? Inclu	ude any property	you borrowed	from, are storing fo	or, or hold in trust	
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		escribe the pr	operty	Value	
	t 10: Give Details About Environmental Info	ormation					

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

Debtor 1 Thomas E. Sobczak, Jr.

Case number (if known)

_	_	ulations controlling the cleanup of these								
		means any location, facility, or property wn, operate, or utilize it, including dispo		aw, whether yo	ou now own, operate, o	or utilize it or used				
		ardous material means anything an env ardous material, pollutant, contaminant,		waste, hazard	ous substance, toxic s	ubstance,				
Rep	ort a	II notices, releases, and proceedings the	at you know about, regardless of when	they occurred	i.					
24.	Has	any governmental unit notified you that	you may be liable or potentially liable	under or in vic	olation of an environme	ental law?				
■ No										
		Yes. Fill in the details.								
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmo know it	ental law, if you	Date of notice				
25.	Hav	e you notified any governmental unit of	any release of hazardous material?							
		No								
		Yes. Fill in the details.								
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environme know it	ental law, if you	Date of notice				
26.	Hav	e you been a party in any judicial or adn	ninistrative proceeding under any envi	onmental law	? Include settlements a	and orders.				
	■ No									
	_	Yes. Fill in the details.								
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the	case	Status of the case				
Pai	rt 11:	Give Details About Your Business or	Connections to Any Business							
27.	Witl	hin 4 vears before you filed for bankrupt	cv. did vou own a business or have an	of the follow	ing connections to any	business?				
		Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time								
		_	•		•					
		☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)								
		☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation								
		_	•							
		 □ An owner of at least 5% of the voting or equity securities of a corporation ■ No. None of the above applies. Go to Part 12. 								
	_	Yes. Check all that apply above and fill								
	Bu	siness Name	Describe the nature of the business		r Identification number	•				
	Ad	dress mber, Street, City, State and ZIP Code)			nclude Social Security					
	(IVal	mber, offeet, only, otate and 211 code)	Name of accountant or bookkeeper	Dates bu	siness existed					
28.		hin 2 years before you filed for bankrupt itutions, creditors, or other parties.	cy, did you give a financial statement t	o anyone abou	ıt your business? Inclu	ide all financial				
		No								
		Yes. Fill in the details below.								
		me dress mber, Street, City, State and ZIP Code)	Date Issued							

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy page 6

Debtor 1	Thomas E. Sobczak, Jr.		Case number (if known)
with a bank		g a false statement, concealing prope to \$250,000, or imprisonment for up t	rty, or obtaining money or property by fraud in connection to 20 years, or both.
/s/ Thoma	as E. Sobczak, Jr.		
	E. Sobczak, Jr. of Debtor 1	Signature of Debtor 2	
Date Jul	y 29, 2019	Date	
Did you atta	ach additional pages to Your State	ement of Financial Affairs for Individu	als Filing for Bankruptcy (Official Form 107)?
■ No			
□ Yes			
Did you pay	y or agree to pay someone who is	not an attorney to help you fill out ba	nkruptcy forms?
No			
☐ Yes. Nan	ne of Person . Attach the Bar	nkruptcy Petition Preparer's Notice, Decl	aration, and Signature (Official Form 119).

Fill in this infor	mation to identify your	case:			
Debtor 1	Thomas E. Sobcz	zak. Jr.			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTR	ICT OF NEW YORK		
Case number _					☐ Check if this is an amended filing
000 : 15	400				g
Official Fo Stateme i		n for Indiv	iduals Filing \	Jnder Chapter	7 12/15
If you are an ind	ividual filing under cha	pter 7, you must fi			
	e claims secured by yo				
You must file thi	ever is earlier, unless th	ithin 30 days after	you file your bankruptcy p		or the meeting of creditors, reditors and lessors you list
	eople are filing togethe	r in a joint case, bo	th are equally responsible	for supplying correct info	rmation. Both debtors must
Re as complete :	and accurate as nossib	ale. If more snace is	needed attach a senarate	e sheet to this form. On the	top of any additional pages,
	our name and case nu		necucu, attacii a separati	s sheet to this form. On the	top of any additional pages,
Part 1: List Yo	our Creditors Who Hav	a Sacurad Claims			
1. For any credit	ors that you listed in P		: Creditors Who Have Clai	ims Secured by Property (C	Official Form 106D), fill in the
information be Identify the cr	elow. editor and the property t	hat is collateral	What do you intend to d secures a debt?	do with the property that	Did you claim the property as exempt on Schedule C?
Creditor's S	SLS		☐ Surrender the property	у.	□ No
name:			☐ Retain the property ar	nd redeem it.	_
Description of	97 Broadmoor Lar	ne Westbury.	Retain the property an Reaffirmation Agreem		Yes
property	NY 11590 Nassau	County	Retain the property an		
securing debt:	Value by www.zillo	ow.com	Retain real property modification		
	D Bank USA, NA		☐ Surrender the property		□ No
name:			Retain the property ar		■ Yes
Description of	97 Broadmoor Lar	ne Westbury,	Retain the property an Reaffirmation Agreem		■ Yes
property	NY 11590 Nassau	County	Retain the property an		
securing debt:	Value by www.zillo	ow.com	Retain real property modification	and pursue loan	
0					
Creditor's T name:	eachers Federal Cre	ait	☐ Surrender the property		□ No
name.			☐ Retain the property ar ☐ Retain the property an		■ Yes
Description of	2010 Kia Forte 110	0000 miles	Reaffirmation Agreem		_ 100

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Debtor 1 Thomas E. Sobczak, Jr.	Case number (if known)	
property Value by www.nada.com securing debt:	Retain the property and [explain]: Continue making payments	
n the information below. Do not list real estate leases.	es ed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), f Unexpired leases are leases that are still in effect; the lease period has not yet ended if the trustee does not assume it. 11 U.S.C. § 365(p)(2).	
Describe your unexpired personal property leases	Will the lease be assumed?	
Lessor's name: Description of leased Property:	□ No	
Lessor's name: Description of leased	□ No	
Property:	☐ Yes	
Lessor's name: Description of leased Property:	□ No □ Yes	
Lessor's name: Description of leased Property:	□ No □ Yes	
Lessor's name: Description of leased Property:	□ No □ Yes	
Lessor's name: Description of leased Property:	□ No □ Yes	
Lessor's name: Description of leased Property:	□ No	
Part 3: Sign Below	☐ Yes	
Inder penalty of perjury, I declare that I have indicated property that is subject to an unexpired lease.	my intention about any property of my estate that secures a debt and any personal	
X /s/ Thomas E. Sobczak, Jr. Thomas E. Sobczak, Jr. Signature of Debtor 1	Signature of Debtor 2	

Official Form 108

Date

Date

July 29, 2019

Fill in	this information to identify your case:				e box only as d	irected	in this form and	l in Form
Debt	or 1Thomas E. Sobczak, Jr.		12	2A-1Sı	nbb:			
Debte (Spous	or 2 		_	□ 1. T	here is no pres	umption	of abuse	
Unite	d States Bankruptcy Court for the: Eastern District of	New York			applies will be m	nade un	ider <i>Chapter</i> 7	nption of abuse Means Test
Case (if know	numberwn)			□ 3. T	Calculation (Offi The Means Test qualified military	does n	ot apply now be	
					eck if this is a			piy later.
∩ffi	cial Form 122A - 1				eck ii tiiis is a	n amei	nded ming	
	apter 7 Statement of Your Cur	rent Mor	othly Inc	om	Δ			12/15
0110	apter 7 Statement of Tour Gur	Terre Wior	itiliy iiic	.0111				12/13
attach case n	complete and accurate as possible. If two married people as a separate sheet to this form. Include the line number to wounder (if known). If you believe that you are exempted fror ying military service, complete and file Statement of Exempter Calculate Your Current Monthly Income	hich the additior n a presumption	nal information a of abuse becau	applies ise you	On the top of ar	ny additi narily co	ional pages, writ onsumer debts o	te your name and or because of
1.	What is your marital and filing status? Check one on	lv.						
	□ Not married. Fill out Column A, lines 2-11.	.,.						
	☐ Married and your spouse is filing with you. Fill ou	t both Columns	A and B, lines	2-11.				
	■ Married and your spouse is NOT filing with you.	You and your s	spouse are:					
	■ Living in the same household and are not lega	lly separated.	Fill out both Co	lumns	A and B, lines 2	2-11.		
	☐ Living separately or are legally separated. Fill of						ng this box, you	ı declare under
	penalty of perjury that you and your spouse are le living apart for reasons that do not include evadin						at you and your	spouse are
10° the	I in the average monthly income that you received from all same 11(10A). For example, if you are filing on September 15, the 6-mers 6 months, add the income for all 6 months and divide the total buses own the same rental property, put the income from that property.	onth period would by 6. Fill in the res	be March 1 thro sult. Do not include	ugh Aug de any i	gust 31. If the amo	unt of your	our monthly incon once. For examp	ne varied during le, if both
				Colur			nn B or 2 or filing spouse	
	Your gross wages, salary, tips, bonuses, overtime, a payroll deductions).	and commissio	ons (before all	\$	4,456.41	\$	5,034.70	
	Alimony and maintenance payments. Do not include Column B is filled in.	. ,	•	\$	0.00	\$	0.00	
	All amounts from any source which are regularly pa of you or your dependents, including child support. from an unmarried partner, members of your household and roommates. Include regular contributions from a sp filled in. Do not include payments you listed on line 3.	Include regular , your depender	contributions nts, parents,	\$	0.00	\$	0.00	
5.	Net income from operating a business, profession,						_	
			otor 1					
	Gross receipts (before all deductions)	\$ 0.00 -\$ 0.00						
	Ordinary and necessary operating expenses Net monthly income from a business, profession, or farr		Copy here ->	\$	0.00	\$	0.00	
	Net income from rental and other real property		.,	· —		· —		
		Deb	otor 1					
	Gross receipts (before all deductions)	\$ 0.00						
	Ordinary and necessary operating expenses	-\$ 0.00	0	•	0.00	•	0.00	
	Net monthly income from rental or other real property	\$	Copy here ->		0.00	\$	0.00	
7.	Interest, dividends, and royalties			\$	0.00	φ	0.00	

Official Form 122A-1

Case number (if known)

					Column A Debtor 1		Column B Debtor 2 o		
8.	Unemployment comp	pensation			\$	0.00	\$	0.00	
	Do not enter the amou	unt if you contend that the amo tt. Instead, list it here:	ount received was a ben	efit under					
	For you		\$	0.00					
	For your spouse		\$	0.00					
9.		nt income. Do not include any		as a	\$	0.00	\$	0.00	
10.	Do not include any be received as a victim o domestic terrorism. If total below.	er sources not listed above. Some fits received under the Social far war crime, a crime against necessary, list other sources of	al Security Act or payme humanity, or internation on a separate page and	ents al or	\$	0.00	\$	0.00	
	•				\$ \$	0.00	\$	0.00	
	Total amount	to from concrete name if any			· · · · · · · · · · · · · · · · · · ·	0.00	* ———	0.00	
	rotai amouni	ts from separate pages, if any.		+	\$	0.00	\$	0.00	
11.		current monthly income. Add the total for Column A to the		\$	4,456.41	+ \$_	5,034.70	= \$	9,491.11
									current monthly
Dowl	O Determine Wie	athantha Masua Tast Annlia	- t- V					incom	е
Part	Determine with	ether the Means Test Applie	s to rou						
12.	Calculate your curre	nt monthly income for the ye	ear. Follow these steps:						
	12a. Copy your total o	current monthly income from lin	ne 11		Cop	y line 11	here=>	\$	9,491.11
	Multiply by 12 (th	ne number of months in a year))					X ·	12
	12b. The result is you	r annual income for this part of	the form				12b	o. \$1	13,893.32
13.	Calculate the mediar	n family income that applies	to you. Follow these ste	eps:					
			NY]					
	Fill in the state in which	ar you live.	INI						
	Fill in the number of p	eople in your household.	4						
	Fill in the median fami	ly income for your state and si	ze of household.				13.	¢ 1	02,384.00
	To find a list of applica	able median income amounts, may also be available at the ba	go online using the link					Ψ	
14.	How do the lines cor	mpare?							
	<u></u>	is less than or equal to line 13	. On the top of page 1, o	check box	(1, There is	no presur	nption of abus	se.	
		is more than line 13. On the to	op of page 1, check box	2, The pr	esumption c	of abuse is	determined b	y Form 1	22A-2.
Part	3: Sign Below								
	By signing here,	I declare under penalty of perj	ury that the information	on this st	atement and	l in any att	achments is t	rue and c	orrect.
			•			,			
	X /s/ Thomas E. S								
	Signature of D								
	Date July 29, 201								
	MM / DD / YY								
	If you checked lir	ne 14a, do NOT fill out or file F	orm 122A-2.						
	If you checked lir	ne 14b, fill out Form 122A-2 an	d file it with this form.						

Thomas E. Sobczak, Jr.

Debtor 1

Fill in this information to identify your case:	Check the appropriate box as directed in
Debtor 1 Thomas E. Sobczak, Jr.	lines 40 or 42:
Debtor 2 (Spouse, if filing)	According to the calculations required by this Statement:
United States Bankruptcy Court for the: Eastern District of New York	■ 1. There is no presumption of abuse.
Case number	☐ 2. There is a presumption of abuse.
(if known)	
	☐ Check if this is an amended filing
Official Form 122A - 2	
Chapter 7 Means Test Calculation	04/19
To fill out this form, you will need your completed copy of Chapter 7 Statemen	t of Your Current Monthly Income (Official Form 122A-1).
Be as complete and accurate as possible. If two married people are filing toger space is needed, attach a separate sheet to this form, Include the line number additional pages, write your name and case number (if known). Part 1: Determine Your Adjusted Income	
Copy your total current monthly income. Copy line 11 fro	om Official Form 122A-1 here=> \$ 9,491.11
2. Did you fill out Column B in Part 1 of Form 122A-1? No. Fill in \$0 for the total on line 3.	
■ Yes. Is your spouse Filing with you?	
■ No. Go to line 3.	
☐ Yes. Fill in \$0 for the total on line 3.	
Adjust your current monthly income by subtracting any part of your spot household expenses of you or your dependents. Follow these steps:	use's income not used to pay for the
On line 11, Column B of Form 122A–1, was any amount of the income you repexpenses of you or your dependents?	ported for your spouse NOT regularly used for the household
■ No. Fill in 0 for the total on line 3.	
☐ Yes. Fill in the information below:	
State each purpose for which the income was used For example, the income is used to pay your spouse's tax debt or to	Fill in the amount you are subtracting from your spouse's income
support other than you or your dependents.	
	\$
	\$
	\$
	\$ 0.00
Total.	\$
	Copy total here=> \$ 0.00
4. Adjust your current monthly income. Subtract line 3 from line 1.	\$ 9,491.11

Official Form 122A-2

Debtor 1	Thomas E. Sol	oczak, Jr.		Case number (if	known)	
Part 2:	Calculate Your	Deductions from Your Income				
to ar instr Dedu your	nswer the questions uctions for this for act the expense amo actual expenses if the	ervice (IRS) issues National and Is in lines 6-15. To find the IRS stam. This information may also be a unts set out in lines 6-15 regardless are higher than the standards. E	andards, go online available at the bards of your actual expe	using the link specifie kruptcy clerk's office nse. In later parts of the nounts that you subtract	ed in the separate e. e form, you will use so cted fro your spouse's	me of
		ot deduct any operating expenses to om month to month, enter the average	·	om in income in lines 5	5 and 6 of form 122A-1	
-		from refers to you, it means both yo		if Column B of Form 12	22A-1 is filled in.	
E	The number of nee		luationa from inco			
	Fill in the number of plus the number of a	pele used in determining your decompeople who could be claimed as exany additional dependents whom you in your household.	cemptions on your fe	deral income tax returr		
Natio	onal Standards	You must use the IRS Nationa	al Standards to answ	er the questions in line	es 6-7.	
7.	Standards, fill in the Out-of-pocket heal the dollar amount fo people who are 65 of	th care allowance: Using the number of out-of-pocket health care. The number of older-because older people have amount, you may deduct the additional desired the care.	d other items. per of people you en mber of people is spl a higher IRS allowa	tered in line 5 and the lit into two categoriespance for health care cos	\$_ IRS National Standard people who are under (65 and
Peop	ole who are under 6	55 years of age				
	7a. Out-of-pocket l	nealth care allowance per person	\$55.00			
	7b. Number of peo	ple who are under 65	X4			
	7c. Subtotal. Multi	iply line 7a by line 7b.	\$ 220.00	Copy here=>	\$	
Peop	ole who are 65 year	s of age or older				
	7d. Out-of-pocket l	nealth care allowance per person	\$114.00			
	7e. Number of peo	ple who are 65 or older	X0			
	7f. Subtotal. Multi	iply line 7d by line 7e.	\$	Copy here=>	+\$	
	7g. T otal. Add line	7c and line 7f		\$220.00	Copy total here=>	\$220.00

Debtor 1	T	homas I	E. Sobcz	ak, Jr.				Case number	r (<i>if known</i>)			
Loc	al Sta	andards	You mus	st use the IRS	Local Standards to	answer the	questions in lin	nes 8-15.				
				the IRS, the two parts:	U.S. Trustee Progr	ram has div	rided the IRS L	₋ocal Stand	lard for ho	ousing for		
_		•			operating expensent expenses	es						
To a	answ	er the qu	estions in	n lines 8-9, us	e the U.S. Trustee	Program c	hart.					
					pecified in the separ kruptcy clerk's offic		ions for this for	m.				
8.		-			nd operating experunty for insurance a					. •		808.00
9.	Hou	sing and	utilities -	Mortgage or	rent expenses:							
	9a.				entered in line 5, fill ge or rent expenses				\$	3,160.00		
	9b.	Total ave	erage mon	nthly payment	for all mortgages an	nd other deb	ts secured by y	our home.				
		contractu	ually due to		onthly payment, add d creditor in the 60 0.							
		Name of	the credit	or		Avera	ge monthly ent					
		SLS				\$	1,752.13					
		TD Ban	ık USA, N	NA		\$	321.78					
				Total averag	e monthly payment	\$	2,073.91	Copy here=>	-\$	2,073.91	Repeat thi amount on line 33a.	
	9c.	Net mort	gage or re	ent expense.								
		Subtract or rent e	line 9b (to xpense). It	otal average m f this amount i	nonthly payment) fro s less than \$0, ente	m line 9a (<i>r</i> r \$0	mortgage 	\$	1,086	.09 Copy	> \$	1,086.09
10.					rogram's division o					rect and	\$	0.00
	Exp	plain why:										
11.	Loca	al transp	ortation e	expenses: Ch	eck the number of v	ehicles for v	which you claim	an ownersl	hip or oper	ating expense).	
	□ 0	. Go to lin	ne 14.									

12. **Vehicle operation expense:** Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the *Operating Costs* that apply for your Census region or metropolitan statistical area.

638.00

☐ 1. Go to line 12.

2 or more. Go to line 12.

Case number (if known)

Thomas E. Sobczak, Jr.

Debtor 1

13.	You	icle ownership or lease expense: Using the IRS Local s may not claim the expense if you do not make any loan of than two vehicles.						
Vel	hicle	Describe Vehicle 1: 2010 Kia Forte 110000 r	niles Value	by www	ı.nada.co	m		
13a.	Own	ership or leasing costs using IRS Local Standard			\$	508.00		
13b.		rage monthly payment for all debts secured by Vehicle 1. not include costs for leased vehicles.						
	are o	alculate the average monthly payment here and on line 1 contractually due to each secured creditor in the 60 month cruptcy. Then divide by 60.			at			
		Name of each creditor for Vehicle 1	Average may payment	onthly				
		Teachers Federal Credit	\$	8.89				
		Total Average Monthly Payment	\$	8.89	Copy here =>	-\$	Repeat this amount on line 33b.	
13c.		Vehicle 1 ownership or lease expense tract line 13b from line 13a. if this amount is less than \$0,	enter \$0.		\$	499.11	Copy net Vehicle 1 expense here => \$	499.11
Vel	hicle	2 Describe Vehicle 2: 2010 Kia Forte 110000 r	niles Value	by www	ı.nada.co	m		
13d.	Own	ership or leasing costs using IRS Local Standard			. \$	0.00		
13e.		rage monthly payment for all debts secured by Vehicle 2. ed vehicles.	Do not includ	de costs fo	r			
		Name of each creditor for Vehicle 2	Average m	onthly				
		-NONE-	\$					
		Total Average Monthly Payment	\$	0.00	Copy here => -\$	0.0	Repeat this amount on line 33c.	
13f.		Vehicle 2 ownership or lease expense tract line 13e from line 13d. if this amount is less than \$0,	enter \$0		. \$	0.00	Copy net Vehicle 2 expense here => \$	0.00
14.		lic transportation expense: If you claimed 0 vehicles in asportation expense allowance regardless of whether you				dards, fill in the	Public \$	0.00
15.	also	itional public transportation expense: If you claimed 1 deduct a public transportation expense, you may fill in who claim more than the IRS Local Standard for <i>Public Transp</i>	hat you believ					217.00

Thomas E. Sobczak, Jr. Debtor 1 Case number (if known) Other Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories. 16. Taxes: The total monthly amount that you will actually owe for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. 1.827.48 Do not include real estate, sales, or use taxes. 17. Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs. 0.00 Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. 18. Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than 0.00 term. 19. Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. 0.00 Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. 20. Education: The total monthly amount that you pay for education that is either required: as a condition for your job, or 100.00 for your physically or mentally challenged dependent child if no public education is available for similar services. 21. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. 0.00 Do not include payments for any elementary or secondary school education. 22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. 0.00 Payments for health insurance or health savings accounts should be listed only in line 25. 23. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment 0.00 expenses, such as those reported on line 5 of Official Form 122A-1, or any amount you previously deducted. 7,181.68 24. Add all of the expenses allowed under the IRS expense allowances. Add lines 6 through 23.

Case number (if known)

Add	litional Expense Deductions These are additional deduction	ons allowed by the	e Means Test.		
	Note: Do not include any exp	pense allowances	listed in lines 6-24.		
25.	Health insurance, disability insurance, and health savings insurance, disability insurance, and health savings accounts the your dependents.				
	Health insurance \$ _	0.00			
	Disability insurance \$	0.00			
	Health savings account + \$_	0.00			
	Total \$_	0.00	Copy total here=>	\$	0.00
	Do you actually spend this total amount?				
	□ No. How much do you actually spend?				
	Yes \$_				
26.	Continued contributions to the care of household or famil continue to pay for the reasonable and necessary care and su				
	your household or member of your immediate family who is ur include contributions to an account of a qualified ABLE progra	nable to pay for su	ch expenses. These expenses may	\$	0.00
27	Protection against family violence. The reasonably necessary	· ·		–	
21.	safety of you and your family under the Family Violence Preve				
	By law, the court must keep the nature of these expenses con	fidential.		\$	0.00
28.	Additional home energy costs. Your home energy costs are line 8.	e included in your i	nsurance and operating expenses on		
	If you believe that you have home energy costs that are more	than the home en	eray costs included in expenses on line		
	8, then fill in the excess amount of home energy costs.	than the nome on	ergy costs included in expenses on line		
	You must give your case trustee documentation of your actual amount claimed is reasonable and necessary.	l expenses, and yo	ou must show that the additional	\$	0.00
29.	29. Education expenses for dependent children who are younger than 18. The monthly expenses (not more than \$170.83* per child) that you pay for your dependent children who are younger than 18 years old to attend a private or public elementary or secondary school.				
	You must give your case trustee documentation of your actual claimed is reasonable and necessary and not already account				
	* Subject to adjustment on 4/01/22, and every 3 years after that	at for cases begur	on or after the date of adjustment.	\$	0.00
30.	Additional food and clothing expense. The monthly amount higher than the combined food and clothing allowances in the than 5% of the food and clothing allowances in the IRS Nation	IRS National Stan			
	To find a chart showing the maximum additional allowance, go instructions for this form. This chart may also be available at the				
	You must show that the additional amount claimed is reasonal	ble and necessary	' .	\$	60.00
31.	Continuing charitable contributions. The amount that you vinstruments to a religious or charitable organization. 26 U.S.C		stribute in the form of cash or financial	+\$	0.00
		. , , , ,			
32.	Add all of the additional expense deductions. Add lines 25 through 31.			\$	60.00

Thomas E. Sobczak, Jr.

Debtor 1

Case number (if known)

Thomas E. Sobczak, Jr.

Debtor 1

Ioans, To calcordito Mo Los Cop Cop Los Los List	and other secured debt, fill in line culate the total average monthly pay r in the 60 months after you file for b ortgages on your home: py line 9b here ans on your first two vehicles: py line 13b here	ment, add all amounts that are contractually	due t	o ead	ch secured		verag aymei	e monthly nt 2,073.91
To calcorredito Mo Loa Cop Loa Cop Loa Loa Loa Loa Loa Loa Loa L	culate the total average monthly pay in the 60 months after you file for bortgages on your home: py line 9b here ans on your first two vehicles: py line 13b here py line 13e here t other secured debts:	ment, add all amounts that are contractually sankruptcy. Then divide by 60.				=> \$	_	nt
Mo Loa . Cop Loa . Cop . Cop . Lis	py line 9b here ans on your first two vehicles: py line 13b here py line 13e here t other secured debts:					=> \$	_	nt
Loa c. Col c. Col l. Lis	ans on your first two vehicles: py line 13b here py line 13e here t other secured debts:					=> \$		
Loa c. Col c. Col l. Lis	ans on your first two vehicles: py line 13b here py line 13e here t other secured debts:					.=> \$		
. Co	py line 13e heret other secured debts:					=> \$		
. Co	py line 13e heret other secured debts:							8.89
l. Lis	t other secured debts:					=> \$		0.00
ne of ea	ch creditor for other secured debt	Identify property that secures the debt				•		
		, , , , , , , , , , , , , , , , , , ,			Does paymer include taxes insurance?			
					□ No			
-NO	DNE-					•		
	··· ·				⊔ Yes	\$		
					□ No			
					☐ Yes	\$		
					-			
					□ No			
		_			☐ Yes	+ \$		
						Сору		
. Tota	al average monthly payment. Add line	es 33a through 33d	\$		2,082.80	total here=>	\$	2,082.80
or othe	er property necessary for your su . Go to line 35. s. State any amount that you must	pay to a creditor, in addition to the payment ion of your property (called the <i>cure amoun</i> nformation below.	? :s					
ıme of tl	he creditor	Identify property that secures the debt			Total cure amount			nthly cure ount
LS		97 Broadmoor Lane Westbury, NY 11590 Nassau County Value by www.zillow.com		\$	43,016.53	÷60 = \$		716.94
O Banl	k USA, NA	97 Broadmoor Lane Westbury, NY 11590 Nassau County Value by www.zillow.com		\$	2,910.22	÷ 60 = 3	.	48.50
				\$_		÷ 60 = +5	\$	
						Сору		
		т-	otal \$		765.44	total here=>	æ	765

Debtor 1	Thor	nas E. Sobczak, Jr.	Case number (if known)			
		we any priority claims such as a priority tax, child support, or alimony due as of the filing date of your bankruptcy case? 11 U.S.C. \S 507.	· that			
	No. Yes.	Go to line 36. Fill in the total amount of all of these priority claims. Do not include current congoing priority claims, such as those you listed in line 19.	or			
		Total amount of all past-due priority claims	\$	0.00	÷ 60 = \$	 0.00

Debtor 1	Thor	nas E. Sobczak, Jr.		Cas	se ni	umber (if known)		
F	or more	eligible to file a case under Chapter 13? 11 U.S.C. § information, go online using the link for Bankruptcy Basins for this form. Bankruptcy Basics may also be availab	sics specified						
	No.	Go to line 37.							
	Yes.	Fill in the following information.							
		Projected monthly plan payment if you were filing under	er Chapter 13	3	\$				
		Current multiplier for your district as stated on the list is Administrative Office of the United States Courts (for d and North Carolina) or by the Executive Office for Unite (for all other districts).	istricts in Ala	abama	X				
		To find a list of district multipliers that includes your district link specified in the separate instructions for this fobe available at the bankruptcy clerk's office.					C	opy total	
		Average monthly administrative expense if you were fil	ling under C	hapter 13		\$	I	ere=> \$	
		of the deductions for debt payment. s 33e through 36.						\$_	2,848.24
Total	Deduc	tions from Income							
38. A	dd all o	f the allowed deductions.							
		e 24, All of the expenses allowed under IRS e allowances	\$	7,181.6	8				
	•	e 32, All of the additional expense deductions	\$ \$	60.0	_				
		e 37, All of the deductions for debt payment	+\$	2,848.2					
				2,040.2	_	٦			
		Total deductions	\$	10,089.9	2	Copy total	here	=> \$ _	10,089.92
Part 3:	Det	ermine Whether There is a Presumption of Abuse				_			
39. C	alculate	e monthly disposable income for 60 months							
3	39a. Co	py line 4, adjusted current monthly income	\$	9,491.1	1_				
3	39b. Co	py line 38, Total deductions	-\$	10,089.9	2				
3		nthly disposable income. 11 U.S.C. § 707(b)(2). btract line 39b from line 39a	\$	-598.8	1	Copy here=>\$		-598.8	<u>1</u>
F	or the	next 60 months (5 years)					x 60		
3	39d. To	tal. Multiply line 39c by 60	39d.	\$	-35	5,928.60	Copy here=>	\$	-35,928.60
40. Fi	ind out	whether there is a presumption of abuse. Check the	box that app	olies:			_		
	The I	ine 39d is less than \$8,175*. On the top of page 1 of the	nis form, che	ck box 1, Th	ere	is no presu	mption of	abuse. Go	to Part 5.
		ine 39d is more than \$13,650*. On the top of page 1 or if you claim special circumstances. Go to Part 5.	f this form, c	heck box 2,	The	ere is a pres	umption o	f abuse. Yo	ou may fill out
] The I	ine 39d is at least \$8,175*, but not more than \$13,65	0*. Go to line	e 41.					
		to adjustment on 4/01/22, and every 3 years after that for			the	date of adiu	ıstment.		

ebtor 1	Tho	mas E. Sobczak, Jr.	Case number (if known)		
41.	41a.	Fill in the amount of your total nonpriority unsecured debt. If you filled out A Summary of Your Assets and Liabilities and Certain Statistical Information Schedules (Official Form 106Sum), you may refer to line 3b on that form.	\$x .25]	
	41b.	25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(A)(i)(·	Copy here=>	\$
		Multiply line 41a by 0.25]	
25	% of y	ne whether the income you have left over after subtracting all allowed decour unsecured, nonpriority debt. e box that applies:	ductions is enough to pa	у	
		39d is less than line 41b. On the top of page 1 of this form, check box 1, <i>The</i> part 5.	re is no presumption of ab	use.	
		39d is equal to or more than line 41b. On the top of page 1 of this form, che <i>umption of abuse.</i> You may fill out Part 4 if you claim special circumstances. The			
Part 4:	Giv	ve Details About Special Circumstances			
		ve any special circumstances that justify additional expenses or adjustme	ents of current monthly i	ncome fo	or which there is no
reas	onable	e alternative? 11 U.S.C. § 707(b)(2)(B).			
	lo. Go	o to Part 5.			
□ Y	es. Fill	I in the following information. All figures should reflect your average monthly ex	pense or income adjustme	ent for ea	ach
		m. You may include expenses you listed in line 25.			
	ne	ou must give a detailed explanation of the special circumstances that make the cessary and reasonable. You must also give your case trustee documentation justments.	expenses or income adjus of your actual expenses o	tments r income	
	G		Average monthly expens or income adjustment	е	
	_		\$		
			\$		
			\$		
			\$		
Dort F.		na Dalaur			
Part 5:	_	In Below gning here, I declare under penalty of perjury that the information on this stater	ment and in any attachmen	nts is true	and correct
			none and in any accommon	10 10 11 40	and correct.
	Th	/ Thomas E. Sobczak, Jr. nomas E. Sobczak, Jr.			
Dr		gnature of Debtor 1			
Da		uly 29, 2019 M / DD / YYYY			

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of New York

In re	Thomas E. Sobczak, Jr.		Case No).	
		Debtor(s)	Chapter	7	_
	DISCLOSURE OF COMPENSA	TION OF ATTO	RNEY FOR I	DEBTOR(S)	
C	ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I compensation paid to me within one year before the filing of the erendered on behalf of the debtor(s) in contemplation of or in	he petition in bankruptcy	or agreed to be pa	id to me, for services rendered or to	
	For legal services, I have agreed to accept		\$	2,000.00	
	Prior to the filing of this statement I have received			2,000.00	
	Balance Due			0.00	
2. T	he source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3. T	he source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4. I	I have not agreed to share the above-disclosed compensation	on with any other person	unless they are me	embers and associates of my law firn	n.
[☐ I have agreed to share the above-disclosed compensation v copy of the agreement, together with a list of the names of				
5. I	n return for the above-disclosed fee, I have agreed to render le	egal service for all aspec	ts of the bankruptc	y case, including:	
b c.	 Analysis of the debtor's financial situation, and rendering a Preparation and filing of any petition, schedules, statement Representation of the debtor at the meeting of creditors and [Other provisions as needed] Negotiations with secured creditors to reduce reaffirmation agreements and applications as 341 meeting. 	of affairs and plan which d confirmation hearing, a e to market value; ex	n may be required; and any adjourned be mption plannir	earings thereof;	st
6. B	y agreement with the debtor(s), the above-disclosed fee does Representation of the debtors in any dischargany other adversary proceeding. These and at \$425.00 per hour. A per diem attorney may than \$350.00 per appearance.	geability actions, jud other actions are incl	cial lien avoida ided in more de	tail in the Retainer Agreement	r
	CE	RTIFICATION			_
	certify that the foregoing is a complete statement of any agree inkruptcy proceeding.	ement or arrangement for	payment to me fo	r representation of the debtor(s) in	
Ju	ly 29, 2019	/s/ Hanin R. Shad	lood		
Da		Hanin R. Shadoo			
		Signature of Attorne			
		Aronow Law, PC 20 Crossways Pa			
		Suite 210	iik Diive Noitii		
		Woodbury, NY 1	1797		
		516-762-6700 Fa	x: 516-303-0066	;	
		Hanin.S@Aronov	vLaw.com		
		Name of law firm			

United States Bankruptcy Court Eastern District of New York

In re Thomas E. Sobczak, Jr. Case No.				
		Debtor(s)	Chapter	7

VERIFICATION OF CREDITOR MATRIX

The above named debtor(s) or attorney for the debtor(s) hereby verify that the attached matrix (list of creditors) is true and correct to the best of their knowledge.

Date: July 29, 2019

/s/ Thomas E. Sobczak, Jr.

Thomas E. Sobczak, Jr.

Signature of Debtor

/s/ Hanin R. Shadood

Signature of Attorney

Hanin R. Shadood 5489596

Aronow Law, PC

20 Crossways Park Drive North

Suite 210

Woodbury, NY 11797 516-762-6700 Fax: 516-303-0066

USBC-44 Rev. 9/17/98

Amex P.o. Box 981537 El Paso, TX 79998

Bank Of America Po Box 982238 El Paso, TX 79998

Dept Of Ed/navient Po Box 9635 Wilkes Barre, PA 18773

Discover Fin Svcs Llc Pob 15316 Wilmington, DE 19850

Goodyear Tire/cbna Po Box 6497 Sioux Falls, SD 57117

IRS 1040 Waverly Avenue Holtsville, NY 11742

Jpmcb Card Po Box 15369 Wilmington, DE 19850

New York State Dept of Taxation & Financ P.O. Box 5300 Albany, NY 12205-0300

SLS 8742 Lucent Blvd suite 300 Littleton, CO 80129

Stern & Eisenberg, PC 485 B Route 1 South suite 330 Iselin, NJ 08830

Td Bank N.a. 32 Chestnut St Lewiston, ME 04240

TD Bank USA, NA 3701 Wyzata Blvd Minneapolis, MN 55416

Teachers Federal Credit 2410 N Ocean Avenue Farmingville, NY 11738

Verizon 500 Technology Dr Weldon Spring, MO 63304

Verizon 140 West Street New York, NY 10007

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

STATEMENT PURSUANT TO LOCAL BANKRUPTCY RULE 1073-2(b)

DEBTOR(S):	Thomas E. Sobczak, Jr.	CASE NO.:.
		(b), the debtor (or any other petitioner) hereby makes the following disclosure owledge, information and belief:
was pending at any spouses or ex-spous partnership and one have, or within 180	time within eight years before thes; (iii) are affiliates, as defined or more of its general partners;	purposes of E.D.N.Y. LBR 1073-1 and E.D.N.Y. LBR 1073-2 if the earlier case ne filing of the new petition, and the debtors in such cases: (i) are the same; (ii) are in 11 U.S.C. § 101(2); (iv) are general partners in the same partnership; (v) are a (vi) are partnerships which share one or more common general partners; or (vii) ither of the Related Cases had, an interest in property that was or is included in the l
NO RELATED	CASE IS PENDING OR HAS E	BEEN PENDING AT ANY TIME.
☐ THE FOLLOWI	NG RELATED CASE(S) IS PE	ENDING OR HAS BEEN PENDING:
1. CASE NO.:	JUDGE: DISTRICT	C/DIVISION:
CASE STILL PENI	OING (Y/N):	[If closed] Date of closing:
CURRENT STATU	US OF RELATED CASE:	
		(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHI	ICH CASES ARE RELATED (1	Refer to NOTE above):
	LISTED IN DEBTOR'S SCHE F RELATED CASE:	DULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
2. CASE NO.:	JUDGE: DISTRICT	//DIVISION:
CASE STILL PENI	OING (Y/N):	[If closed] Date of closing:
CURRENT STATU	US OF RELATED CASE:	
		(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHI	ICH CASES ARE RELATED (1	Refer to NOTE above):
	LISTED IN DEBTOR'S SCHE F RELATED CASE:	DULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
3. CASE NO.:	JUDGE: DISTRICT	T/DIVISION:
CASE STILL PENI	DING (Y/N):	[If closed] Date of closing:

DISCLOSURE OF RELATED CASES (cont'd)	
CURRENT STATUS OF RELATED CASE:	(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHICH CASES ARE RELATED (Refer	to NOTE above):
REAL PROPERTY LISTED IN DEBTOR'S SCHEDUL SCHEDULE "A" OF RELATED CASE:	E "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
	als who have had prior cases dismissed within the preceding 180 days may not nired to file a statement in support of his/her eligibility to file.
TO BE COMPLETED BY DEBTOR/PETITIONER'S A	TTORNEY, AS APPLICABLE:
I am admitted to practice in the Eastern District of New Y	York (Y/N): Y
I certify under penalty of perjury that the within bankrup as indicated elsewhere on this form. /s/ Hanin R. Shadood	tcy case is not related to any case now pending or pending at any time, except
Hanin R. Shadood 5489596 Signature of Debtor's Attorney Aronow Law, PC 20 Crossways Park Drive North	Signature of Pro Se Debtor/Petitioner
Suite 210 Woodbury, NY 11797 516-762-6700 Fax:516-303-0066	Signature of Pro Se Joint Debtor/Petitioner
	Mailing Address of Debtor/Petitioner
	City, State, Zip Code
	Area Code and Telephone Number

Failure to fully and truthfully provide all information required by the E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any other petitioner and their attorney to appropriate sanctions, including without limitation conversion, the appointment of a trustee or the dismissal of the case with prejudice.

<u>NOTE</u>: Any change in address must be reported to the Court immediately IN WRITING. Dismissal of your petition may otherwise result.

USBC-17 Rev.8/11/2009